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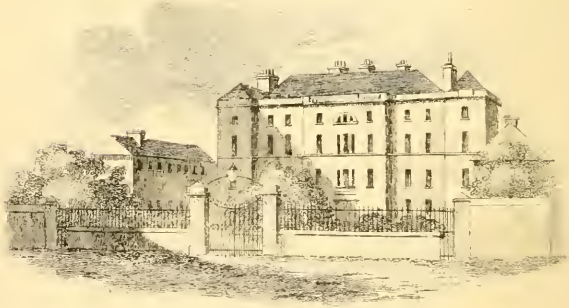

ROYAL LUNATIC ASYLUM, 1840.

INFIRMARY, 1840.

MEMORANDA

REGARDING

THE ROYAL LUNATIC ASYLUM,

INFIRMARY, AND DISPENSARY,

OF

MONTROSE;

WITH OBSERVATIONS ON SOME OTHER INSTITUTIONS OF A LIKE NATURE, AND AN APPENDIX OF DOCUMENTS, PARTLY RELATING TO RESTRAINT IN THE TREATMENT OF INSANITY.

PREPARED, AT REQUEST OF THE MANAGERS, BY

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"Facts, truly related, are the best applauses, or most lasting reproaches."

SWIFT.

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The following Memoranda may be safely affirmed to possess one virtue—fidelity. In drawing them up, the Preparer, having access to all necessary records, felt at liberty to select, arrange, comment, and infer, as his own judgment guided him. He is solely accountable, therefore, in regard to any peculiarities not existing in the materials themselves; and the Managers of the Institution, equally with the community at large, must be held perfectly free to discuss points on which he has hazarded opinions.

Owing to circumstances which need not be mentioned, the publication has been longer deferred than was expected; but the delay, which explains a few incidental sentences, has allowed the introduction of some important matters not originally contemplated. This remark applies especially to authentic statements regarding several institutions at a distance from Montrose, and to various documents on the subject of Restraint. These may give an interest to the Work much beyond what could have arisen from limitation to a single establishment, and tend, as is hoped, no less to benefit the individual Charity than to advance a science which has superlative claims on the attention of mankind.

*** Cordial thanks are due to Messrs. J. & D. Nichol, (Publishers, Montrose), for their liberality in supplying the Frontispiece by which the Work has been so appropriately embellished.

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MEMORANDA,

&c.

The union of a Dispensary and an Infirmary with a Lunatic Asylum, long well known in Montrose, would have required some explanation, at any time, when its affairs were published abroad; and now that a modification of it is advancing towards completion, a few brief memoranda on the subject may be deemed no less interesting than appropriate. While they set forth the humanity and liberal conduct, without attempting to justify the entire policy, of former patrons, they are calculated, it is believed, to aid a project for securing equal or greater benefits to posterity.

This three-fold Institution originated in the most kindly and disinterested motives. The position of the Tolbooth, in which Lunatics were usually immured, was a source of daily grievance to the compassionate inhabitants of Montrose, more especially during an age that slowly recognized the supremacy of benevolence as a remedy in mental diseases. In fact, the quaint *notandum*, by Lord Fountainhall, written in 1681, still retained a portion of its applicability. "Mr. Alexander Burton gave in a complaint to the Secret Council against his brother, for putting him in Hopkirk the chirurgeon's hand, as if he had been a madman, &c. He answered (the allegations to that effect): They had his portion in their hands, and he was only asking his annual rents; and to refuse him his own, and thrust him *in ergastulo*, and treat him as a fool, would raise pep-

per and passion in any man's nose, and then they termed these acts fury, for *ira est brevis furor.* In Scotland, *having no Bedlam, we commit the better sort of mad people to the care and tameing of chirurgeons, and the inferior to the scourge.*" His Lordship adds, "The Duke of Albany desired that he (the complainant) might be permitted to speak, where he extravagated so that they (the Lords) inclined to assoilzie John his brother, and *find that he* (Alexander) *deserved to be put in a correction-house.*" The practice, thus exemplified, continued long after Fountainhall's time; and, as might be shown, was occasionally had recourse to, even in Montrose, several years subsequent to an establishment which ought to have superseded all ground for such an outrage.

But, to return. Mrs. Carnegie of Charleton, one of the earliest and most efficient friends of the Institution, has recorded her sentiments on the subject very expressively. Having been requested to sit for her portrait, which was intended "to be hung up in the Hospital, as a testimony of regard," she replied, in a letter, dated July 6, 1815, as follows:—"I am much obliged to the Managers, but beg leave to decline the honor, holding this expression of their respect, *inscribed in their minutes*, a sufficient testimony to whatever merit I may have had in suggesting and endeavouring to forward the useful Institution which I rejoice to see prospering under their direction. My view in this undertaking was merely to rid the Town of Montrose of a nuisance—that of mad people being kept in prison in the middle of the street—and the hope that, by providing a quiet and convenient Asylum for them, by good treatment and medical aid, some of these unfortunate persons might be restored to society. The plan was set agoing by the liberality of the public, powerfully excited by the unwearied exertions of my worthy assistant, the late Provost Alexander Christie, and soon rose to a degree of consequence unthought of in the beginning. In his life-time, a proposal similar to the present was made to him and me, and declined by both. But although then and now I disclaim views of personal distinction as motives of action, yet being made sensible of general approbation is highly gratifying to me; and as the Managers of the Royal Lunatic Asylum wish to have some visible commemoration of their Founders hung up in the Hospital, if they adopt the less expensive and unostentatious mode of short inscriptions on

tablets, as is common in other public Institutions, it would be more agreeable to me."*

There needs no additional evidence as to the primary and main object which this Lady and her associates had in view. But though, perhaps, not likewise intended at first, if even seriously contemplated, by the Managers, and though, unquestionably, the departments are by no means essentially allied, in point of fact both the Dispensary and Infirmary must be reckoned coeval with, and throughout their existence dependent on, the Lunatic Asylum. The original Subscription Paper, it is true, did not allude to the former; while it specified at least one element of the latter —regarded, be it noticed, as a supplementary and conditional appendage: "We, subscribers," says the document, "considering the deplorable situation of many Lunatics in the town of Montrose, and the good consequences that might result from having them properly lodged and taken care of, do hereby oblige ourselves to pay," &c. &c. "to be applied towards erecting a House and Garden, in the Links of Montrose, for the accommodation of persons disordered in mind. *It is further proposed to add to this design a Ward for the accommodation of the Sick Poor, in case the money will allow of it.*"† But, notwithstanding the difference in this respect, after the edifice itself, as agreed on, had been completed, and previously to the reception of either Lunatics or Sick Poor, the Managers, at a meeting on 3d December 1781, recommended a committee "to

* The Managers readily complied; and the Memorial, to be seen on entering the House, is in the following words:

"Built by Subscription,
A.D. MDCCLXXXI.
and
Incorporated by Royal Charter,
A.D. MDCCCXI.
To the benevolent and indefatigable exertions of
Mrs. SUSAN CARNEGIE of Pitarrow,
and
ALEXR. CHRISTIE, Esq. Chief Magistrate of Montrose,
THIS ASYLUM,
FOR AFFLICTED HUMANITY,
The first of the kind in Scotland,
Owes its existence.
This Marble was erected, by order of the Managers,
A.D. MDCCCXVI."

† This paper, of date March 1779, is quoted in a Report (printed) by Messrs. Jameson and Willis, 26th May 1832—page 3. At the first meeting thereafter, 5th July 1779, no less than fifty-one persons were present as Subscribers—of whom, it is believed, only one survives in 1839—namely, Mr. John Brand. —[Shortly after the above note was written, Mr. Brand also finished his career —namely on the 20th June—aged about ninety.]

consider of a proper plan for a Dispensary;" and, on 7th January following, a Report to that effect was approved by them. It seems quite explicit:—"The design of this Institution is to administer advice and medicine *gratis* to such Poor as shall be recommended, as proper objects of this Charity, by the Managers of the Lunatic Asylum—it being understood that every person who shall give One Guinea per annum to the Hospital, shall be entitled to recommend a proper object," &c. Among "the Rules to be observed" was, that "the Patients, when cured, shall deliver in their letters of recommendation,"—no doubt to serve as records and prevent abuses. The Report concludes with a satisfactory intimation:—"The Medical Gentlemen in Montrose do pledge themselves, that they shall give regular attendance at the Dispensary by rotation, each a month in his turn, during one hour on each of the (three) days specified."

In terms of the Plan thus adopted and guaranteed, on 1st July, 1782, "The Dispensary," as says the minute, "being now opened," Dr. Ross agreed to officiate there during the current month. But, so little, apparently, was the proffered boon needed or valued at the time, this gentleman reported, in August, that "only one woman applied;" Dr. Bate, his successor, made a similar statement, only one man having "attended as a patient;" while Dr. Hunter, next in order, though authorized, seemingly by way of extra-invitation, "to give medicines to poor people who are not able to come to the Hospital," mentioned no more than that he had furnished a truss to a poor boy, and that "one Margaret Cameron had also applied, but that *no relief could be given to her unless she was admitted as a patient into the Hospital.*" Having considered and pitied her case, the Managers acquiesced in the virtual suggestion; and thus, therefore, besides accommodating Lunatics, a few of whom were now inmates, the House may be said to have commenced as an INFIRMARY, in the ordinary acceptation of that title. The character, moreover, is very unequivocally aimed at in the minute of 5th May, 1783; when "The meeting, considering that the large room in the Hospital is unoccupied, are of opinion that, when servants or other poor people meet with accidents, or labour under such diseases that physicians cannot conveniently attend them, they should be admitted, upon being recommended by any three of the Committee." Evidence of

like import might be adduced, were it necessary; but suffice to say, the combination, thus early brought about, has remained to the present day, notwithstanding reasonable objections in quarters equally disinterested and influential. Some of these deserve notice aside from intrinsic merit.*

Thus, then, for example, Sir Alexander Ramsay, in a letter of 7th December, 1785, expressed his opinion very cogently :—"I am not yet reconciled to the plan of engrafting an Infirmary, of extent, upon that Hospital (meaning the Asylum, usually and unhappily so styled); neither do I think that such people are to be commodiously lodged where those who are disordered in their senses occupy the body of the House. The disturbance which must be unavoidably given would ill suit their condition. If a place for Lunatics is introduced into an Infirmary, they should be confined to a wing. I therefore think the present Hospital should continue as it is (meaning obviously without the *graft)*, and be no further an Infirmary but (than) to supply the sick with medicines administered by the Physicians who are pleased to give their attendance (meaning, no doubt, the Dispensary purely). The Institution is good, and I am persuaded, under good management, and by the mode adopted of extending the benefit to all who chuse to send their unhappy friends for relief, the Hospital may be of more service than greater and better endowed benefactions, which are generally confined to certain districts and descriptions of men."

The sentiments of Mrs. Carnegie, again, written as they were at the distance of several years, and concurred in, it appears, by various persons, may be reckoned substantially the same, though directed to an incidental point :—"While I give willing tribute of praise to our medical gentlemen in this Department (the Infirmary and Dispensary), let it not be suspected I mean to impute blame in the remotest degree, when I say I have heard it observed, that another branch, *and for which indeed the Hospital was principally*

* Historically speaking, the Charter (1811) seems somewhat incorrect,—its preamble stating that, "in a few years afterwards (meaning, apparently, subsequent to erecting and opening the building), a Dispensary was added to the establishment." But, without supposing this discrepancy to be either material or inexplicable, it must be kept in view that, while the body is constituted under the title of "The Royal Lunatic Asylum, Infirmary, and Dispensary of Montrose," the Managers have power "not only to alter or innovate the existing Bye-laws, but even to rescind the same, *in toto*, if they shall see good cause, and to substitute in their place others, which shall appear better calculated to promote the interest and welfare of the Institution."

erected, is not so much attended to, or does not appear equally successful—I mean the cure of Lunatics. The defect, it is presumed, neither arises from want of abilities or of good will, but from the system adopted in the beginning, of Monthly Rotation. (Then having, on strong grounds, advised the appointment of a Physician, 'particularly for attending the Lunatics,' while, according to her view, the Dispensary might continue, she proceeds.) By this arrangement, a man would have leisure and time to study this particular branch of physic, which, for the good of mankind, it is much to be wished were farther advanced, and would have encouragement from the expectation of gaining a reputation in it," &c. &c. In short, this most intelligent woman had the merit of urging, if not suggesting, the adoption of a system which would have virtually disjoined the Infirmary from the Asylum, partly on the ground that a special training is required in the attendants of the latter, over and above ordinary professional education, and partly because the principal object of the Institution had been in some degree impaired by unavoidable demands on them in another direction.

'Twere worse than useless to reiterate later arguments on the subject, inasmuch as they have had their full effect —tardily it must be owned—in prompting measures for a dismemberment of the triple league; but it is not, perhaps, superfluous to affirm, that all imaginable interests claim the speediest possible fulfilment of the project to this effect announced by a Committee in a Report presented to the Monthly Meeting of Managers, 3d January, 1836:— Having taken "into consideration the propriety of separating the Infirmary from the Lunatic Asylum, they were unanimously of opinion that, if this could be accomplished, it would be of much benefit to the Asylum itself; and if a separate building for an Infirmary could be erected, having proper accommodation for cases of fever and other contagious disorders, as well as for the surgical and other cases at present admitted into the Infirmary, a very great boon would thereby be conferred on the Sick Poor in the town and neighbourhood."*

* Singularly enough, at nearly the very time when the union now adverted to was being consolidated at Montrose, the last vestiges of something similar were disappearing at Edinburgh. In the original plan for the Royal Infirmary there, a large portion of the under-floor was allotted to Insane Patients, who remained its inmates for a considerable period. "It was, however, soon found that the cells afforded neither proper convenience for the cure nor comfort of

Returning to the Dispensary, it may be remarked that, though on one occasion, 5th May, 1783, "about twenty-four persons" are said to have "applied for relief," nevertheless the absence of numbers in some subsequent Reports, and a particular minute—bearing "that it was inconvenient, *and likewise unnecessary*, for the Physicians to attend the Hospital three times in the week,"—seem to denote only a small demand on its bounty. But, be the supposition right or wrong, an increase must have been either experienced or anticipated in April 1785, when the Physicians were recommended "to record the Patients in the Books for that purpose, and to produce the same monthly;" while the fact itself, however to be explained, is amply proved by the statements consequent on this direction. Thus, during the remainder of the same year, the numbers were respectively—in April, 33; May, 16; June, 30; July, 28; August, 31; September, 21; October, 4; November, 25; December, 17,—making in all, 205.

These monthly notices—persevered in, as they were, with few exceptions, for many years, up indeed to August 1802—afford like results, thereby showing a large, and, on the whole, progressively augmenting, though, of course, fluctuating, participation in the advantages conferred by the Institution. A tabular view, confirming this observation—by no means without value—may be appended to this sketch. Fortunately, but, in the judgment of medical men, not adequately, Annual Reports, commencing after the cessation of these returns, and proceeding regularly onwards to the present day, complete the numbers, so far at least as gross amount is concerned. Here, again, singular variations are to be found. For example, in 1810 and 1813, the numbers were only 173 and 196; while in two successive years, 1818–1819, they rose so high as 971 and

the unhappy maniac. The plan, therefore, of uniting a Lunatic Asylum with the Royal Infirmary was gradually deserted; and it may be considered as having finally terminated several years ago." (Short Account of the Rise, &c. of the Lunatic Asylum at Edinburgh, 1812.) To strengthen the parallel, or, in one sense, the contrast, it may be mentioned, that the out-door or Dispensary system, formerly attached to the Royal Infirmary, after being broken off, was superseded by the Royal Public Dispensary (1776), which commenced under distinct Managers and on new funds. The Lunatic Asylum of the same city, unconnected with either of these establishments, was partly designed as a substitute for the irremediably faulty Bedlam attached to the Charity Workhouse there; but, notwithstanding claims, necessities, pledges, and entreaties innumerable, the metropolis of Scotland still ranks vastly below several provincial towns in regard to provision for the Insane. Its history in this respect is absolutely mournful, and, in reality, cannot be counterbalanced, so far as relates to character, by any efforts within the power of the responsible agents.

860,—the former being more than 400 above that which preceded it, and the latter nearly 200 less than its immediate successor; farther, the difference between those of other two consecutive years, 1822–1823, was precisely 300, the higher being 793; and, coming to a still later period, under the superintendence of Dr. Browne, the numbers were, for (eleven months of) the year (ending 30th May) 1835, 638; and for the following years, 773, 1039, and 1081 respectively. The Report for the present year, it will be seen, exemplifies the variability by a contrast, for which sufficient and gratifying reasons are at hand—namely, a comparatively healthy state of the town, and a new regulation on the part of the Managers hereafter to be mentioned.

Now, avoiding nicety of calculation, and without affecting perfect accuracy, 300 may be taken as the average number of patients annually during say fifty years (the period is obviously longer), and these multiplied give 15,000—equal to the existing inhabitants of Montrose—as the total amount of recipients from the Dispensary since its commencement. Though small as compared with the operation of similar institutions elsewhere, relatively to population this is so high as to raise a doubt—perhaps a denial—of the whole having been really "proper objects of the charity;" and here, accordingly, it may be acknowledged, without hesitation, that a departure from the original mode of recommending patients seems to have occasioned abuses which were with difficulty overcome—if they ever have been altogether—by subsequent enactments. But, indeed, another concession is required, not exactly in favor of the policy, however it may testify the generosity, of the Managers. Going beyond the plan announced in 1782, which promised simply "to administer advice and medicines," they hazarded, and for many years persevered in, a species of distribution that could scarcely fail to augment the number, by stimulating the hopes, of applicants. Let a few Reports be appealed to without comment:—(1819) Of these Patients (860), 149 have been supplied with flannel, and 146 with wine;"—(1827) "Of whom (571), 227 have been supplied with flannel, about 100 with wine;"—(1829) "Besides medicines and advice, 552½ yards of flannel have been distributed to 209 Patients, 108 bottles of wine to 65;"—(1831) "617 yards of flannel have been distributed to 225 Patients;"—while in 1832, when the charge for drugs was £33 10s. 9d., that for wine

and flannel together was £3 4s. 3d. more (£36 15s.) In reality, the outlay on these articles (not to speak of some other *extras*) continued during a long period to bear a high proportion to the general expenditure; and, of course, tended materially to heighten the average cost of Patients in this department—a point of great consequence in medical statistics, on which, however, merely an approximation to the truth can be undertaken in this place.

Be it observed, then, that a Report, already mentioned as drawn up by Messrs. Jameson and Willis in 1832, having exhibited certain comparative statements, makes the following inference: "So that the expense of medicines, wine, and flannel, without any charge for house-rent or medical attendants, (namely, 2s. 2½d. in the case of Montrose), amounts to 2½d. each more than at the most expensive of the other Dispensaries in Scotland, every thing included; 1s. 2½d. more than at Aberdeen; and 1s. 8d. (the table shows only 1s. 6½d.) more than at the New Town Dispensary of Edinburgh." Now, supposing this inference to have been correct at the precise period, but not applicable to the whole time during which the establishment has existed, let 1s. 6d. be assumed as a just element, in conjunction with the previously mentioned data, and it follows that the money drawn from the Institution, through this special department alone, must have amounted to £1125, exclusive of interest. In all probability, however, were every circumstance taken into account—as actually a greater number of patients, several more years, a share of rent and salaries, together with interest—this portion of the Charity would be found to have absorbed more than £3000. Fully admitting their *power* to be thus liberal, and eschewing all invidious reflections on its exercise, the most impartial reader cannot fail to think that a very weighty question remains to be deliberated on by the Managers:—While cherishing so freely this scion, have they in no respect been parsimonious towards the main stock?*

* A few incidental remarks, chiefly in confirmation of statements in the text, may occupy a foot note.

Aside from the moderate nature of the calculation regarding the number of Dispensary Patients, when it is known that *many* members of a family were frequently supplied under *one* name, the *actual* amount may be safely said to have exceeded the *estimated;* and, at all events, this circumstance is sufficient reply to the trivial objection, that the same persons may have been applicants more than once.

The Managers appear to have fully resolved at one time on abandoning the system of *extra* munificence at the Dispensary, but were induced to continue it by Mrs. Carnegie, who, on the other hand, as we have seen, had scruples

A few points may now be mentioned before quitting the Dispensary, rather with a view to persons at a distance than for the information of the Managers, who, however, will regard them in connection with any proposed steps towards a change of arrangement.

Of late years, in place of the old system of attendance—namely, by one or two Medical Gentlemen, who officiated at the Infirmary and Dispensary in rotation—six have had charge of as many Districts into which the town was divided, leaving the Hospital itself (as an Asylum and an Infirmary) entirely to the Superintendent, possessing the great privilege, it is true, of calling any of them to his assistance when necessary. Over and above daily or hourly

touching the Infirmary. Compare Minutes of 14th January, 7th July, and 1st September 1812, with the actual practice (more lavish indeed) up to 1832, when the Report, adverted to, recommending its discontinuance, was approved. "At Montrose," says that document, "the Patients (meaning those of the Infirmary) were formerly charged at the rate of 6d. per day for those sent by Kirk-Sessions, and 1s. per day for others; but about three years ago, it was resolved that Collections should be resorted to, and no charge made. These Collections, however, have by no means been so numerous or regular as might have been expected for such a purpose; but this may also be ascribed to the want of a separate establishment, added to a very general impression which prevails, that the funds of the Institution are perfectly sufficient for every purpose, according to the present arrangement; and this idea seems to be justified by the fact that, during the last three years, the whole Collections in Montrose amounted to only £45 3s. 2d., or about £15 per annum, while the Wine and Flannel exceed £60 per annum. During the same period, the Collections in the Country Parishes amounted to £197 14s. 10d., while the Flannel and Wine were confined to the Poor of Montrose"!! This passage will be found of much importance hereafter, and, indeed, any where must rather excite surprise.

A quotation from the Report of an earlier Committee, appointed (5th May 1818) "to make up an average for the last five years of the annual expense which each Patient costs the Institution," will be held as authority for the estimate given in the text, especially when it is considered that the cost of the Dispensary, unlike that of the Infirmary for a time, was never in any measure redeemed or lessened by payments from without. Having taken 57 as the total number of patients in the House (meaning both Asylum and Infirmary), and brought out two results (according to the premises), namely £17 15s. 4d. and £20 18s. 9d., it proceeds thus:—"The expenses of the Infirmary and Dispensary, as selected from the accounts, being Wine, Medicines, and Flannel, on an average of five years, amount to £65, which would be equal to £1 2s. 9d. per annum to each of the 57 Patients. As these expenses, however, are almost, if not wholly, applicable to the Dispensary, the above sum of £1 2s. 9d. ought, in our opinion, to form a deduction from the annual expenses of the Lunatic Patients, which would therefore reduce their annual cost to £19 16s."

Since relinquishing Wine and Flannel (not known to be given in other Dispensaries), the expense of this department must no doubt have materially diminished. But, still, it appears from the Report of a Committee (3d January 1836) that the cost of this branch, at the rate of 1s. per Patient, during the preceding year, amounted to £40 4s. 9d. (an estimate lower than would apply to the two subsequent years), and this, coupled with a loss of £81 18s. 7d. on the Infirmary (the whole being £122 12s. 7d.)—incurred *chiefly* on account of Montrose!—"was defrayed out of the annual rent of the funds bearing interest." Now, taking £50 as the moderate average, during, say as before, fifty years, and we find £2500 as actual outlay on the Dispensary—a sum which, with interest, much exceeds the above estimate.

demands by the Lunatic and other Patients in the House, it is his duty to act as Apothecary in regard to prescriptions from the District functionaries; while, though not required to visit the out-door sick, a considerable portion of his time is allotted to those who apply for advice—they, in point of fact, being often more than fell under the care of any one of his brethren. Now, for reasons well known to Professional men, and easily comprehended by others, there need be no scruple in saying that his practice in this way can neither prove very satisfactory to himself, nor be in the highest desirable degree advantageous to the Patients, however great his qualifications or zealous his assiduity. The principle implicated in this remark, so far from being restricted to the case of Montrose, is common to every Dispensary, the chief agent of which, in consequence of peculiar engagements, or any circumstance whatever, can merely pronounce opinions and give Medicines, without being able to verify or modify the former, and watch over the effects of the latter, in the course of regular periodical attendance on the sick. But, besides the import of this consideration, the Dispensary in question, as must be known to observers, is liable to a serious objection—namely, that its distance from the town is so great as to prove inconvenient for all parties, and, indeed, nearly to render it inaccessible to those who most need its bounty. They are often obliged, in consequence, either to delay application till too late, or to employ very inadequate messengers—mere children, in truth—at the double risk of committing serious blunders and suffering from inclement weather. Beyond a doubt, the purposes of this department would be best accomplished—probably with little or no loss on the score of economy, if rightly conducted—in a state of local separation from both the Asylum and the New Infirmary, by hiring a suitable apartment in a central position as a Consulting Room, and thence issuing prescriptions to one or other of the Druggists in its vicinity.

There only remains to be said *quoad* this branch of the still combined Institution, that a regulation by the Managers, 4th December 1838, secures, in their own hands, the power to check admissions; and that it has already visibly restricted them—every one should hope—to really "proper objects," those, namely, whose condition, in the order of Divine Providence, is at once a trial of humility and an occasion for "good works."

Some historical details, which it may be satisfactory to have brought under review, as compendiously as is consistent with the inferences to be deduced from them, relate to the other Provinces conjunctly and separately.

The subscribers to the Charity, united in regard to the main object as formerly shown, at their first meeting recorded in the Minute Books, on 5th July 1779, are said to have agreed "that a Lunatic Hospital (it will be observed there is no word of an Infirmary) shall be erected in some convenient place in the Links of Montrose, but that the expense of building and furnishing the same, with garden walls, shall not exceed £500 sterling." A Committee reported, 3d January 1780, in favor of an estimate for the former, by David Jamie, amounting to £420, which was approved. On 7th August of the same year, "the subscription to the Hospital" was declared to be £632 1s. 9d. On 23d June 1781, the key of the House (then completed) was reported as having been delivered up by the contractor; and sundry articles, not included in the estimate, were directed to be added "in the neatest and frugalest manner." The meeting, on 8th September following, "considering the Hospital is now finished," &c. appointed a General Meeting of the Subscribers to be held, "that a state of the management of the Committee may be laid before them," &c. Accordingly, on 1st October next, when there appeared a balance of £204 11s. 3d. "of the subscription money after defraying the expense of building the Hospital," that General Meeting, having considered "the most proper method of raising funds for supporting the Hospital," agreed that a subscription paper should be immediately opened "to receive subscriptions either annually or altogether, as people shall incline." The entire amount of aid, consequent on this plan, was £346 1s. on 7th January 1782; and, on 4th February following, the sum was reported to have been increased, by donations and subscriptions intended to be for two or more years, £101 10s. 6d. But then various new demands, as for building walls, had to be answered.

At the meeting of the last-mentioned date, James Booth was appointed Keeper, and, on 6th May thereafter, the first reception of a Lunatic Patient was agreed to.*

* Mr. Booth, after serving faithfully for about forty years, died on the 20th May, 1839, aged ninety-one. Between his resignation in 1823 and his decease, gratuities, to the amount of nearly £300, were kindly awarded to him by the Managers, in testimony of their approbation.

Accounts being paid, and the House in operation, there remained, on 3d February 1783, a balance in its favor of £385 16s.—of the greater part of which, however, only the interest (namely on £332 10s.) could "be applied to the benefit of the Hospital."* But, in spite of several instances of liberality, as well as much activity on the part of the Managers, matters were far from being in a flourishing state on 5th April 1784, when "The meeting, considering that the funds for supporting the Hospital, notwithstanding all the efforts that have been made, must in a short time be exhausted by the unavoidable expense attending the House, and particularly that of supporting a number of poor patients who are totally unable by themselves or friends to contribute any thing," recommended an application for assistance to "the Scotch merchants at Riga." The immediate result was only £20, shortly afterwards followed by £18 15s.—evidence of kindly feeling, but nothing to endanger a surfeit. Frugality and moderation were therefore unavoidable virtues.

By the 7th February 1785, the balance, at interest, had reached £407 15s. 1½d., and, in the course of a few years, (4th January 1790), it rose to £758 15s. 2½d.—a clear proof of cautious management, and a token of prosperity. On 4th January 1796, the free fund of the Hospital, exclusive of the buildings and furniture, amounted to £3646 14s. 1d.; on 6th January 1801, it was declared to be £4200 3s. 1d.; and on 3d January 1810, not less than £6399 5s. 9d. The acquisition of a Royal Charter next year placed the Institution on new ground, as to Legacies, Funding Money, &c.; but, as Printed Reports since that period are readily accessible, the financial branch of our inquiry need not be further prosecuted. Suffice to say, that, up to a certain period, extension of premises and sundry improvements were no less practicable than demanded; and that the case of Montrose is the very reverse of an exception to the well-known facts in the history of Lunatic Asylums—namely, under reasonably good guidance, they have always been successful, and any amount of capital judiciously laid out on them has met with a fair return.†

* Several Donors expressly conditioned that interest only should be applied to the Charity, and that, on a failure of this, it should be directed towards other benevolent purposes.

† In relation to similar Institutions, it is of consequence to state that a delay in effecting its Incorporation was negatively, so to speak, injurious. Mrs. Carnegie, having occasion to intimate "a very unexpected gift to the Lunatic Hospital" (£300 Stock in the Three per Cent. Consols, from the funds of Mr.

Reflecting how small a building could be erected, even at that period, for £500, while those unfortunates, for whose behoof it was intended, were numerous—*e.g.*, there being applications in favor of ten so early as 5th August 1782—it is quite clear that the allotment of part to the purposes of an ordinary Infirmary must have been as scanty as it was objectionable. The state of the funds, moreover, obviously restricted the introduction of Patients, whether Lunatic or Sick, on another account. Some payment for the benefits to be derived was almost indispensable, and, of course, generally insisted on. But that the early Managers were neither over-rigorous nor ungrateful might easily be proved. They seem, in truth, to have carefully studied every claim, and to have combined justice with mercy to the full compass of their ability. A few minutes will explain part of the policy on which they long acted: —1782, September 2: "In regard the Parish of St. Cyrus has contributed liberally to the Hospital, the Meeting agree to admit —— —— as a Patient, for payment of Five Pounds Sterling yearly,"—this being only one-half of the sum usually imposed.—1783, October: "The Meeting recommend," &c. &c. "to apply to the Presbytery of Brechin, in order to procure annual collections within the bounds of the Presbytery for behoof of the Hospital, in regard Poor People in the different Parishes will receive relief from the Dispensary (not the Infirmary, be it observed), and likewise people disordered in their senses may be admitted into the Hospital; *and due regard will be had in proportion to the Contributions made in the different Parishes.*"—1785, March 7: "The Meeting, in respect this Lunatic (previously named) is recommended by the Right Hon. the Earl of Northesk, who has generously contributed to the Hospital, agree to admit her at the rate of £5 sterling yearly."—1788, March 3: A petition having been presented as usual, the Meeting, "On account

Hawkins, an English gentleman unconnected with Montrose), in a letter of 3d January 1803, says, *inter alia*, "Permit me to request that, at your Annual Meeting, you will consider whether it is not now advisable to obtain a Charter for this Institution, to enable the Managers to receive Donations or Legacies in Stock, or in Land, or to purchase Lands, without being obliged, as at present, to vest either of these kinds of property in some individual, *in trust*, as I presume must be done in the present case; and I trust it will be in the recollection of several of the gentlemen present at the meeting, that a considerable Donation in Land was formerly lost to the Hospital from the difficulties that arose about the legal conveyance of the intended gift." The purposed grant, by Sir Alex. Ramsay, of the Lands of Hospitalshields, is alluded to in the Minute of 3d October 1785, and elsewhere.

of the claimancy of the case, and the benevolence of the Town of Dundee to the Hospital, agree to admit her as soon as she can be brought here."—Dundee, at this time and for years after, was no less defective as to an Asylum than other towns in Scotland, from which, during a long period, applications for admission were frequently made—as Aberdeen, Arbroath, Perth, Cupar in Fife, St. Andrews, &c., not excepting Edinburgh itself.

But, not to multiply examples of the kind, in relation both to Lunatics and the Sick Poor of the more immediate vicinity—who were received either gratuitously or at moderate rates according to circumstances—it is demonstrable that the Managers, so far from being exactors, or niggardly hoarding funds, repeatedly felt compelled at once to circumscribe their bounty, and to look around for the means of prolonging it. In proof of the former point, and because of a question lately agitated, as on other grounds, the following minute will be thought pregnant with meaning:—1791, December 26: A Committee reported "That the number of Lunatics presently in the Hospital amounts to 37; that of these, 12 belong to the Town and Parish of Montrose, and are supported *gratis;* that the sum received for the whole of the other Patients amounts to £230; and it was their opinion, from the state of the funds, that it would be necessary to make an addition to the sums presently charged on account of several of the Patients, and to limit the number of those admitted gratis:" The Meeting, having considered, &c., direct the Treasurer to notify an additional charge in certain specified cases, &c., and "also resolve that in future the number of gratis Patients shall not exceed Ten; and that no Poor Patients shall be admitted within the distance of Dundee, Forfar, and Stonehaven, under twelve pounds, and beyond that distance, under fifteen pounds per annum."

This decision, in regard to gratis Patients, is an epitome of the whole documentary evidence on the subject; and, rightly construed, amounts to a proposition absolutely unassailable:—The Managers, both before and after the Charter, were under no other than what may be fitly styled a voluntary and judicial obligation to admit them, when, how, and to any extent, the circumstances of the Charity safely warranted. It follows, of course, that every local or personal claim, so far from being insisted on as a matter of right, must be submitted to their prudent and

merciful consideration. An instance of this, on the largest scale, and under a peculiarly favorable aspect, may, possibly, put all doubts to rest, and, therefore, merits most candid attention. At the annual meeting 11th June 1816 (some years after the Charter, be it noticed), "Mr. Mudie moved that, in consequence of the reduction of the price of provisions, a Committee of Nine of the Managers should be appointed to consider if any and what reduction should be made in the rates of Boards paid by Lunatic Patients; with power also to consider whether it would be proper to alter the Third Bye-law applicable to gratis patients, and to increase the number to be received from Montrose; and to report generally upon any alteration in the Bye-laws which the Committee might consider for the benefit of the Institution." The motion, than which none could be more explicit, comprehensive, liberal, or promising, was unanimously agreed to. We have its result in the minute of the next annual meeting, 10th June 1817—no less plain, decisive, equitable, and cautious, though brief and ungratifying:—"1st, On account of the great rise in the price of provisions since the last annual meeting, the Committee do not think it advisable to propose any reduction of the general rates of Board. 2d. The Committee do not think that any alteration should be made in the Third Bye-law, for they find, on calculation, that the Town and Parish of Montrose—from the number of its gratis patients already in the Hospital—from those at a reduced rate of Board—from the Distribution of Wine, Flannel, and Medicines, at the Dispensary—and from the gratis patients received from the Parish into the Infirmary—enjoy nearly the whole present free income of the Institution; so that, if at any future period the state of the funds would allow additional benefit to be granted, this should certainly not be confined to the Parish of Montrose, but in some measure extended to other Parishes which contributed to the establishment of the Institution. 3d, The Committee do not think it proper to propose any alteration in your Bye-laws in general." The Report, in these words, was unanimously approved of; and the substantial tenor of it, whatever may be said on the ground of long-continued practice—arising from equally long competency of funds—has not been impaired or in the slightest degree modified by any subsequent act. Reasoning, indeed, from the spirit of another part of the same Report, conjoined with still later evidence

of its truth, every impartial judge must perceive, that, were a process of Account and Reckoning fully gone into, Montrose, as a Town and Parish, would be found an enormous Debtor to the General Charity.

There need be no hesitation in making this last remark, which is susceptible of decisive proof, however it may be received in any quarter; and, indeed, at a time when public liberality has to be earnestly solicited, in fartherance of a plan that holds out immense advantages to a large and populous province, it would be the reverse of honesty or sound policy to withhold a particle of the only basis on which numerous and possibly conflicting interests can be equitably adjusted. Here, therefore, though at the hazard of some repetition, certain details may be offered with a view towards general harmony, and, as an essential preliminary, the removal of opposite prejudices, mutually dependent, there is reason to believe, on an imperfect statement of evidence.

I. The first point requiring to be investigated is the *proportional amount of Contributions* to the Charity. In regard to it, there seems only one mode of doing justice, and this is unavoidably tedious—a faithful and minute enumeration,—which, besides the immediate object, will serve as a record, and may operate as an incentive, to posterity. Such a document—evidently a *desideratum*—was drawn up several years ago, and intended for the same purpose, as appears from the following minute, 8th June, 1830:—"In compliance with the wishes expressed at a former Meeting, the Treasurer laid before the Managers a list of the various donations and collections made for the benefit of the Asylum from its institution to the present time. The Meeting direct," &c., "as a Committee to prepare the list," &c., "for the purpose of being printed and circulated for the information of the Managers, with such other particulars in regard to the history of the Institution as they may suggest." A modification of it will be found in the Appendix—completed, of course, up to 31st May 1839.

II. The second point, to which reference must be made, is the *special destination* of any of the sums contributed to the Institution, and it may be speedily illustrated. Thus, then, at the Meeting of 3d December 1781, "Provost Alex. Christie represented, that Mr. (Adam) Drummond,

the Town's Representative in Parliament, from a consideration of the necessity and usefulness of the Lunatic Hospital to the Town of Montrose and Neighbourhood, had most generously ordered him to subscribe in his name, and which he immediately did in presence of the Committee, the sum of One Hundred Guineas as Mr. Drummond's donation to the said Hospital; which sum is to be lent out on good security, and the interest thereof to be annually applied for the benefit of the Patients of said Hospital. But declaring that, if ever the said Lunatic Hospital shall, for want of funds or any other cause, cease from being so, or from being a place where the necessities of the Poor are relieved, then, and in that case, the said sum of One Hundred Guineas is to be paid to the Magistrates and Town-Council of Montrose for the benefit of the Ancient Hospital of Montrose, of which they are Patrons." The Managers, it need scarcely be said, accepted the gift, and returned thanks to Mr. D. "for so generous and disinterested a mark of his friendship to the distressed Poor of this Town and neighbourhood."

Provost Christie and his brother Thomas had, a little before, made a *similar* destination in regard to their respective grants,—namely, of £50 and £20, but with a difference which it is proper to specify:—The former, speaking in name of both, represented that the sum, &c., "was given by them as part of the fund that is to be appropriated for the future support of the Poor in the said Hospital, and that it was their intention that no more than the annual rent thereof should be applied yearly; and that the principal sum should always remain untouched, and be lent out on good security to the best advantage: That as long as Lunatics, or Poor people of any kind, were supported in that House, the said sum of Seventy Pounds should remain with the Managers thereof as an annual fund for its support; but, if for want of funds, or any other cause, the House presently called the Lunatic Hospital should cease from being so, or from being a House of any kind where Diseased or Poor people were relieved or supported, then, and in that case, it was his brother's intentions, and his, that the said sum of Seventy Pounds should belong and be paid, the one-half to the Town-Council of Montrose for the benefit of the Hospital Poor, and the other half to the Kirk-Session for the benefit of their Poor." (Minute, 1781, 5th November.)

A letter from Sir David Carnegie (6th January, 1782), in regard to his donation (also 100 Guineas), having stated that only the interest thereof should be applied towards "the support of this Charitable Institution," proceeds thus:—"It is likewise my desire that, in case hereafter, from any unforeseen causes, the plan of this Hospital cannot be carried on and supported, that, in that case, the said sum shall be given to the Magistrates and Town-Council of Montrose, that the interest of it may be applied by them towards the relief of their Hospital Poor; but as long as this Hospital continues either as a reception for Lunatics, or for any other public Charitable Purpose whatever, I mean this sum to make part of its funds."

In case of a donation (£50) from Messrs. Low & Smith of Gottenburgh, these gentlemen desired that this sum should "be annexed to the permanent stock, and the interest thereof applied for the benefit of the Hospital"—(Minute, 5th May 1783);—but there was no such condition regarding failure, and ultimate destination, as has been expressed in the other instances. Bailie Alexander Paterson, on the other hand, declared, in a letter of 5th July 1784, that only the interest of what he gave (£30) was to "be applied yearly to said Hospital how long it continues either to receive Lunatics, or be used as an Infirmary, or a Work-house, for the Poor;" and that, "failing of all these, the above principal sum shall fall in and belong to the Kirk-Session of Montrose."

With these exceptions—and the sum mentioned in them, as *conditionally* received, is not large—the entire donations and subscriptions, together with the product of the Institution itself, may be regarded as at the free disposal of the Managers, acting in the spirit of the original design, and in terms of such laws and regulations as they judge expedient accordingly. Were the exceptions even more numerous and weighty, still it is very apparent that, though construed in the most rigorous manner, they afford ample room for choice as to the administration of bounty. So far as the Poor are concerned in it, by virtue of the clauses in question, the Hospital may be, in diverse proportions, a Lunatic Asylum, or an Infirmary, or a Workhouse, or "a House of any kind where Diseased or Poor people are relieved or supported;" or, in fine, one in which "any Charitable purpose whatever" is accomplished. Now, considering how long and liberally the Managers have complied

with the wishes of Subscribers, even the most scrupulous of them, and that provision is made for perpetuating some of the benefits contemplated much beyond the means so secured, he must indeed be a hardy advocate who should, over and above, insist on the admission into the Asylum of any number of *gratis* patients from the Town of Montrose as a matter of right or stipulated arrangement.

III. We proceed thirdly, and at some length, to the *actual power* of the Managers, as deducible from their practice in regard to admissions; and, in treating of this point, much of the history of the Institution will necessarily be brought into view. The instances chosen serve to exemplify a principle which must be placed beyond all cavil or dispute.

So early as 6th May 1782, when the reception of the first Lunatic Boarder (a female belonging to Montrose, at the rate of £8 per annum,) was agreed to, and two other petitions were given in, "The Provost represented that H— G—, residenter in Montrose, had been long in a state of Insanity, and a great burden and trouble to the inhabitants—and that no person will now agree to keep her in their house—and therefore craved that she might be admitted into the Hospital." The Meeting delayed consideration of the matter (as usual long afterwards) till next sederunt, June 3, when the Managers agreed to "admit and receive" her "as a Patient into the Hospital." On this latter day "was given in a petition by the Kirk-Session of Montrose, representing the Lunacy of — — (two females) both of this Parish"—which, as above, lay over till July 1st, when it was agreed to. As no board was named in regard to them, or to the previous case, they must be considered as gratis Patients. They were soon followed by some from Country Parishes, in regard to whom board at different rates was stipulated for. On 6th January 1783, the Managers agreed to admit one female from Montrose, without specifying board; and as to another, deferred decision till her Lunacy was certified. The latter was afterwards admitted, on her brother engaging to pay £10 yearly; but, with respect to the former, there was a peculiarity worth noticing. She had been received on a petition from the Kirk-Session of Montrose, who were afterwards instructed to provide her with clothes,—"the Committee relieving them of that burden in time coming." (1783, March 3d.) On 3d November of the

same year, another female was directed to be admitted at the instance of the Kirk-Session; and on 7th March 1785, on petition from a "wright at Marywell, in this Parish," the Meeting, "in respect of the poverty of her husband," agreed to receive her a Patient at the rate of £5 yearly. But, in a case somewhat similar, the rate of £10 was fixed on July 4th of same year, as in various instances where the Patients belonged to distant Parishes; and on 7th November following, when a petition from — —, "late a merchant in Montrose," in behalf of his daughter, was brought forward, the Meeting, "considering that there is at present no room in the Hospital, recommended to Provost Glegg to admit her how soon there is proper accommodation." He reported having done so in December; and on 6th February 1786, a plan and estimate for four additional cells were ordered. They were soon in requisition—a proof of the increasing demands on the Establishment; and the same remark applies, of course, to an extension of the building, with more cells, determined on 4th June 1787.

The Meeting, of the last date, "recommended the Provost to admit a Lunatic, who was wandering through the Town, and who can give no account of himself, into the Hospital;" and, "having recovered his senses," the Meeting, on 2d July following, "appoint him to be dismissed, and five shillings to be given him to defray his travelling expenses."

Passing by various other admissions (both into the Asylum and the Infirmary) as not peculiar, we find, on 4th May 1789, when a petition from the widow of a brewer in Montrose, representing the Lunacy of her son from infancy, and her own poverty, was read, that the Meeting agreed to admit him into the Hospital, "on account of his youth, for one year:"—7th September of same year, "the Provost reported that J. B., mariner in Montrose, was admitted into the Hospital on account of his Lunacy, of which the Meeting approve:"—6th September 1790, "Petition from E. S., residenter in Montrose, praying that her daughter may be admitted into the Hospital,—the Meeting recommend to Provost Webster to make particular inquiry into the woman's situation;" but no proceeding thereon is afterwards recorded. In the case of a Lunatic, relict of a landwaiter in Montrose, mentioned on 4th October following, the Meeting agreed to admit her "upon this provision,

that £4, which has been annually paid to her since her husband's death by the Town of Montrose, shall be applied and paid by the Town to the Hospital in time coming, while she shall remain a Patient thereof, for her support:" with equal regard to justice and prudence, it would seem, on 8th March 1791, the Meeting consented to the admission of another widow (namely, of a Montrose sailor), "upon security for her maintenance, after the rate of £10 per annum."

It is deducible from these and numerous similar instances, that the Managers, in the absence of any express law or stipulated arrangement, judged of cases according to their peculiar circumstances and merits, but, generally speaking, with a tendency in favor of persons belonging to Montrose, and more especially when petitioned for, or any way aided by, the Kirk-Session. We come now to the Resolutions of 26th December 1791, already mentioned, whereby, *inter alia*, the number of *gratis* Patients was restricted to TEN; while no poor Patient within a certain distance was to be admitted under £12 per annum, or beyond that distance under £15. The power of the Managers to make such an enactment seems never to have been doubted; and its expediency must be judged of now, as then, by the condition of the funds. That these were such at the time as to justify a diminution of liberality, is manifest from the Minute of 2d April 1792, when the Treasurer was authorized to "return thanks to the Associate Antiburgher Congregation at Perth, for their donation of £14 3s.; and in respect of the declining state of the funds, to request the aid of the Presbytery of the Associate Antiburghers." Notwithstanding this fact, we find that, on a special application from the Minister of Craig, the Managers reduced the board of a Patient from his parish to £7 on 4th June following; whereas, in the case of a person recommended by the Magistrates and Ministers of Brechin, the board was fixed at £12 (5th July same year.)

But, most distinctly to evince the principles on which the Management was now conducted, it is essential that a few passages be quoted from the Minutes without abridgement.

1792, 6th August: "Provost Christie informed the Meeting that, upon an application to him in behalf of J. L., a poor Patient belonging to the Town, the said J. L. had been admitted into the Hospital, and that the friends had given an obligation to pay what should be demanded for

his support—which being considered by the Meeting, they approve of J. L.'s admission, but delay consideration of the terms." The case was noticed on 7th January next, as follows:—"The Meeting recommend to Provost Christie to notify to the friends of J. L. that it will be necessary they pay for his accommodation for the time past, and find security for the sum agreed to be accepted for him in time coming, otherwise to remove him from the Hospital by the 1st of February next;" and what that sum was appears, with other particulars, in Minute of 1st April following, when it is said—"J. C. paid to the Treasurer £18 on account of J. L., as stated in the report of this meeting (which mentions the sum as being payment for two years): in respect whereof, the Meeting agree that the said J. L. shall continue in the Hospital till the month of August 1794; and, provided there shall be no vacant gratis cell betwixt and that period, his friends shall be obliged either to remove him, or make a further allowance for his support. But, in case of his death before that period, the sum now paid to remain with the Hospital."

Meanwhile (3d September 1792), in another case, "the Meeting, considering that the stated number of poor Patients is presently complete, find themselves under the necessity of refusing the desire of (a) petition;" and, on the other hand, 3d December following, there was "presented a petition from several of the inhabitants in the neighbourhood, complaining of the noise made by — —, a Lunatic confined in the Tolbooth, through the night, and praying she may be admitted into the Hospital—which being considered by the Meeting, they agree that the said — — shall be taken in as a gratis Patient during the pleasure of the Managers."

1793, March 4: On the presentation of a letter from a gentleman in Dundee, requesting the admission of a Patient, "the Meeting, considering that the Hospital is now full, agree that — — shall have the first vacant cell, unless in case of an application from any of the inhabitants of the town of Montrose;" and, accordingly, on 6th May following, the widow of a baker in that town was admitted, but at the rate of £12 per annum, which was fixed as the charge in other instances; and, an application having been made (4th November) for relief from the obligation by friends on her account, the Meeting delayed consideration thereof till 2d December, when, before giving any answer,

the Meeting appointed the Medical Gentlemen to "examine into the state of gratis Patients," and also of the individual, with another female.

1794, June 1: The Provost, having represented that a person, son-in-law of the widow of a shipmaster in Montrose, had been admitted—mentioned "that he understood the said — — was still exceedingly ill, and that, on account of sundry circumstances in his situation, he was considered by him and other gentlemen as a most proper object of the Charity; which, being considered by the Meeting, they agree to allow the said — — to continue a Patient of the Hospital *during the pleasure of the Managers.*"

Still more particular in one respect is the following case: —4th August, same year: "Presented to the Meeting—petition from — —, son of — —, one of the Kirk-officers, representing the Lunacy of the said — —, his father, and praying that he might be continued a Patient of the Hospital, to which he was admitted about two months ago, upon the recommendation of Miss — —, but who refuses to contribute longer for his support; which petition being considered by the Meeting, and that the number of gratis Patients presently in the Hospital are (is) *considerably beyond the number laid down in the rules*, they direct the said — — to be discharged on Saturday next, unless security is lodged betwixt and that day for payment of his board at the rate of £6 10s. per annum." The very next Minute (1st September) states "that the Kirk-Session had agreed to become bound to pay — —'s (the above-mentioned person) board" at the rate named.

In several subsequent instances of petition for gratis admission, the Managers delayed consideration, seemingly because there were no cells to spare; and, as the price of provisions had risen at this period, a Committee was appointed "to consider of an addition to the board of the Patients presently in the Hospital." They reported 1st February 1796, *inter alia*, that in their opinion "the friends of — — (before-mentioned), presently a gratis Patient, *should pay some gratification to the Hospital.*" On the other hand, shortly afterwards, the Managers yielded to a petition for relief from an obligation to pay in the case of a Patient who had been admitted *gratis*, but for whom board was subsequently directed to be paid. Indulgence of this kind was not unusual in the case of representations from a distance. A Minute of 4th July 1796,

shows the general line of policy on which the Managers continued to act. "The Meeting, taking into consideration the state of the funds, and the increase in the expense of every article necessary for the supply of the Hospital, and at the same time the advantage derived from the Charity by the inhabitants of this and the neighbouring county of the Mearns, in having objects of distress taken off their hands and relieved at an easy charge, think it proper that application should be made to the Synod of Angus and Mearns for a Collection at the doors of the Parish Churches for the benefit of the House; and for that purpose the Meeting direct the Treasurer to transmit a copy of this Minute to the Clergymen of the different Parishes, with a request that they will not only support the measure in the Synod, but also promote the success of the Collection to the utmost of their power."

Widely diffusive as their bounty was, however, and specially directed towards their townsmen as we have seen it, the Managers nevertheless were far from being chargeable either with indiscriminate profusion or blind partiality. Thus, "an application from several of the inhabitants for the admission of — —, an object of charity, into the Hospital being produced (on the last mentioned day), the Meeting delay consideration thereof till next month;" when (1st August) the Meeting expressed the opinion "that it would be rather improper to admit the said — — into the Hospital; but *the Managers declare their readiness to contribute along with the Kirk-Session and other Public Charities for the support of the said* — —, in some place of the country." Then, again, in relation to the same individual, we have the following very particular deliverance:—2d January 1797: "Mr. Molleson (minister) represented to the Meeting that in consequence of the Minute of the 1st August last, the Kirk-Session had endeavoured to find a situation for — — in the country, but had not been able to prevail on any person to take her; and as she still continued to be a very great nuisance in the public street, he submitted whether it would not be necessary to receive her into the Hospital, *especially as the Town of Montrose would be ready, as he was informed, to contribute* £3, *the Kirk-Session* £2, *Mr.* — £1, *and Mr.* — £1, *annually towards her support;* which, being considered by the Meeting, together with a certificate of Lunacy produced, they agree to admit the said — — a Patient of

the Hospital upon payment of the sums mentioned by Mr. Molleson; and in order to give place to the said — —, they recommend to Mr. Booth to endeavour to find a situation in the country for — — (a male Patient) at the expense of the Hospital." It is afterwards mentioned (3d April), that the aunt of a female Patient having been prevailed upon to remove her from the House, upon payment of £4 per annum, the above-named person had been received in her place; and *the Treasurer was directed to call upon the Kirk-Session and the two individuals specified for One Pound each, as agreed on.*

It appears from the Minutes that the Managers did not invariably adhere to their own rule in regard to the point now under review. Thus, 4th December, same year—on a representation by — —, weaver, of his wife's Lunacy, of his having a family of young children, and being unable to support her,—in consequence of which he prayed for her admission as a gratis Patient, "the Meeting agree to admit the said — — into the Hospital for one year, as soon as there is an empty cell; but in respect there are already a greater number of gratis Patients in the House than the regulations admit of, *the Managers recommend to the Provost to allow a collection to be made through the town* for the woman's support for the above period." The collection was actually made, to the amount of £8 13s.; and, in proof of one of the inferences deducible from their conduct in this instance, we find that on a petition from the Kirk-Treasurer, produced 2d April 1798, representing the Lunacy of — —, a blacksmith, and craving his admission, the Meeting "delay consideration, *until the Kirk-Session condescends upon funds for his support;*" and, accordingly, on production of an obligation, under the hand of Mr. Molleson and the Kirk-Treasurer, to pay such board as the Managers judged reasonable, the man was admitted; while it afterwards appears (6th August, same year) that, on the death of one of the Patients, the female above-mentioned was directed to be continued on the *gratis* list. Equal generosity was shown in another case—3d December following—the poor man being the son "of a respectable inhabitant of Montrose," and having no friends to support him; and not long afterwards, (1st July 1799), the admission of another gratis Patient seems to have been agreed to, simply on the application of her brother, without any recorded statement of peculiar circumstances. Shortly

thereafter, a female, who had been admitted "on the recommendation of a few of the Managers," was allowed "to continue a gratis Patient till next Meeting;" while, "in respect of his father's public services," the Managers restricted the board of another Patient (son of a Magistrate in Montrose) to £10 per annum, (2d December, same year); and, on 4th March 1800, when "the Provost informed the Meeting that he and other two of the Managers had thought proper to order — —, formerly a Patient, to be received into the Hospital for some time as a gratis Patient," the Managers approved. This person, however, was probably admitted into the Sick-Ward—the Patients of which were occasionally received at moderate boards, and sometimes without any charge, according to circumstances.

At this period, as we learn from various Minutes, additional accommodation was needed to supply the demand on the Asylum, and, accordingly, eight more cells were ordered 7th October of same year; while it is manifest, from an entry on 6th January following, that the interior arrangements had by no means been quite correct,—the Managers "considering that *it will be* an improvement to have a room fitted up for the use of the female Patients through the day, *separate from the men*," &c.

But to return: We have an example of fairness somewhat different on 3d March of that year (1801), when, on a petition, the Managers admitted a Patient—her sister having agreed to pay £20, to which the former would be entitled, "as an indemnification, so far as it will extend, of the expense of her board;" and on 7th April next, on petition from a saddler in Montrose, the Meeting agreed to admit a female as a gratis Patient upon the first vacancy.

7th September 1802: On petition by a merchant in Montrose, a poor Patient was admitted on payment of £5 annually; and on 2d November, a weaver of the same place was received on the gratis list.

The unexpected gift of £300 Stock from the funds of Mr. Hawkins, with a legacy of £1000 from the Misses Mill, added to the fruits of prudent conduct, enabled the Managers to extend the Institution, and augment its beneficent usefulness. On 7th June 1803, accordingly, we find them listening to the statements of one of the Physicians in favor of a reduced board from Patients in the Sick-Ward, still "providing the same shall, in no case, be less than Five Shillings per week." But, though at least as liberal

as ever in other respects, they did not abandon any economical habits as to admission, even in cases where the highest influence might be supposed to have operated. Thus, 1st November, same year, when a letter from Mrs. Carnegie was produced, "representing the melancholy situation of a woman in Cupar of Fife, and desiring to be informed of the lowest terms on which she can be admitted," the Meeting fixed the board at £12 per annum, but declare that this shall be no precedent, and that the low terms are entirely on account of the urgency of the case, and from respect to Mrs. Carnegie,—£16 being determined on in another instance of the kind brought forward at the same time; while, on 6th December, the board of a Patient was reduced to £13. On 3d January following, a clergyman's daughter was received at £10, "on account of the particular circumstances of the case;" and on 7th February thereafter, the board of another Patient was reduced from £13 to the same sum; while, on application from persons at a distance, a female was admitted into the Hospital as a pauper, 6th March. In like manner, on application from one of the Medical Gentlemen, a weaver (probably, but not certainly of Montrose) was admitted as a gratis Patient (Lunatic) for one month, 3d July; and, "in respect of his public services," the son of a Montrose Magistrate (then dead) was received "at the moderate sum of £10," on 4th September following. On the same day, 5th February 1805, one Patient was admitted gratis, and another was agreed to be received, "provided the Kirk-Session of Craig oblige themselves to pay £10 per annum." On 2d April of same year, a female who had formerly been in the House, but removed, was re-admitted as a gratis Patient.

More accommodations were now again required, in consequence of applications which could not be answered.

1807, August 4: "Upon the petition of — —, the Meeting agree to restrict his sister's board to £6; and, upon the death of the first gratis Patient presently in the House, to admit her to that benefit, upon her brother supplying her with clothes." 6th October: A gratis Patient was admitted on petition by her sisters in Montrose: and, passing by other instances, two were admitted gratis Patients on 5th September 1809, both belonging to Montrose, without any very special reason being assigned; and on 6th March 1810, a Petition from a baker in Montrose being produced, the Meeting, having considered the same, "with the in-

digent circumstances of the said — — (his sister), agree to her immediate admission as a gratis Patient for the space of twelve months, *reserving power either to continue her upon that condition, or to exact such board from her, after that period, as shall be then determined on.*"

On the day last mentioned, the Report of a Committee, appointed previously in regard to the terms of a Charter, underwent discussion, as also on 3d April following, when certain Resolutions having been agreed to, a Committee was named for carrying them into effect. The Charter itself says nothing whatever on the subject of admission, the mode and terms of which continued to all appearance totally unaffected by it. Thus, to give an example immediately before:—On 5th February 1811, a petition from the Kirk-Session of Montrose in favor of a Pauper, whose admission was prayed for "on as moderate terms as should appear to be proper," the Kirk-Session becoming bound to pay the same, having been presented, the Meeting, "in respect of the distressing situation of the said — —, agree to his immediate admission, and fix his board at the rate of £10 per annum"—the clearest possible proof that no *right* was either claimed or acknowledged by the respective parties. Then, to show the known and understood power of the Managers regarding it, and more especially as related to gratis Patients, subsequent to the Charter, we have merely to quote portions of Minutes in which Reports of a Committee on the state of the funds, &c., are particularly noticed. Thus, of date 14th January 1812, speaking of "the gratis Patients, or those who pay no board," it is said—"Of these, there are at present eleven in the House—making one beyond the number allowed by the Regulations. *As the gratis Patients are a heavy burden upon the funds, and increase considerably the expenses of the Hospital, it is the opinion of the Committee that no more ought to be admitted until the present number shall be reduced, by death or otherwise, to ten, or fewer;* and that thereafter no gratis Patient should be received, unless he or she has resided in the Town or Parish of Montrose for five years. The Committee would, however, suggest that four Patients might be admitted from the Town or Parish of Montrose at the moderate board of £10 per annum, provided their circumstances require it, and they have had their residence therein for three years; and, as there are already three Patients in the Hos-

pital from Montrose at £10 per annum, the Committee are of opinion that these three should be considered as part of the four." Under the head of BOARDS, the Committee say:—"There are several Lunatics in the House who were admitted at early periods, at boards which do not now meet the expenses of their keeping. *Their circumstances may be such as to permit an increase of board, so as to lessen the burden they presently occasion to the funds. The Committee would therefore recommend to the Managers to make the necessary inquiries what increase of board could be paid for these Lunatics, so that in future they may not be a burden to the Institution.* The Committee would also recommend the propriety of drawing lines for the future government of the Managers, in fixing the rates of board to be paid by persons hereafter applying for admission," &c. &c. The Meeting, at which this Report was finally considered, substantially approved of the above portions of it, but made some alterations on other parts; and, accordingly, the former came speedily into operation. We may give an example as to the main point under review.

1813, January 5: "There was produced a petition from several inhabitants of the North Links of Montrose, praying that — —, who laboured under Insanity, might be admitted a gratis Patient; which, having been considered, the Meeting refuse to receive her as a gratis Patient, in respect there is no vacancy, but agree to admit her at £18 per annum, *upon condition that it is defrayed by the Kirk-Session and Chapel of Montrose, and by such subscriptions as can be raised for her support.* They also agree that she shall be entitled to the first vacancy on the gratis list." On 2d February following, the Meeting agreed that the person above-named was entitled to a vacancy occasioned by the death of another female Patient, and ordered her to be put on the gratis list accordingly.

Somewhat different in nature, but still indicating the same discretionary power, was the decision of the Managers, in regard to an application for gratis admission—namely, on 6th April next, that, as the Physicians, who had examined the Patient, did not think him a proper object for the Institution, "the Meeting refuse the desire of the petition." Nevertheless, on 4th May thereafter, they agreed that he should be admitted a gratis Patient, and entitled to the first vacancy; while, on same day, in

terms of a letter from the Kirk-Treasurer, a Patient, formerly in the House on payment of board, was put on the free list, in room of another deceased. Repeated instances of the latter kind show the practice to have been quite common. But, granting this point without scruple or farther evidence, a few out of many examples at a subsequent period will be sufficient to demonstrate the perfectly spontaneous principle on which it depended. The selection may be entirely confined to the interest of the Kirk-Session, as, in the face of what has already been produced, all idea of right or title, or even claim, in any other quarter, would be absolutely preposterous.

1813, September 7: "The Meeting being informed that — —, belonging to this place, had been sent from Arbroath, a few days ago, in a state of mental derangement, and lodged in the common Jail of this Burgh, direct that she shall be admitted into the Hospital, as a gratis Patient, until next Meeting, *upon condition that the Kirk-Session of Montrose, betwixt and that time, grant an obligation for payment of board thereafter, at such rate as shall then be settled;* but failing their doing so, the said — — will be dismissed." Accordingly, it was reported 5th October next, that "the Kirk-Session of Montrose would defray the board of — —, admitted by order of last sederunt—whereof the Meeting approve, and fix her board at £12 per annum;" and on 7th December thereafter, on a representation that the number of £10 Patients "was not at present full," the board of this person was restricted to that sum.

A similar case occurred 1st February 1814, when the Patient was directed to be taken in gratis till next Meeting,—the Kirk-Session being meantime recommended "to consider whether they will then become bound for her board,"—to which they expressed agreement, for three months,—the rate being £10 per annum; and they afterwards lengthened the period for other three months; but she was eventually placed on the gratis list.

1816, 3d September: "The Rev. Mr. Paterson made a verbal application for the admission of — — of this place, who was in a state of Mental Derangement, which, being considered, the Meeting agree to her admission, on an obligation by the Kirk-Session of Montrose for payment of board at the rate of £18 per annum;" but, on the application of the Kirk-Session, 5th November, "the Meeting

dispenses with any charge for her board during the time she was in the Hospital."

It will be remembered, that a previous proposal for increasing the number of gratis Patients, &c., was abandoned or negatived at the General Meeting of 10th June 1817,—a little before which the Clerk was directed "to intimate to those who may apply for the admission of any Lunatics, that none can be received until the repairs and additional buildings are finished." Some of the proceedings in regard to Lord Binning's proposed Bill, hereafter to be spoken of, may also be appealed to as bearing on the present question; and here it may be added, that, during the course of them, one Manager expressed an opinion, that, in case the intended petition on the subject was not granted, the Managers would "have it in their power to pay the expense of their Pauper Lunatics, if sent to the District Asylum, out of the same funds that supported them at present,"—a remark sufficiently correct, perhaps, to have dissipated much anxiety as to the supposed operation of his Lordship's measure.

The following entries regarding two individuals are somewhat peculiar in more senses than one. 1819, March 2: "Dr. Gibson represented that — — and — —, who had been admitted as Infirmary Patients, in consequence of accidents, had proved to be both Lunatics: that, after they had recovered of their wounds, the Doctor intimated to their friends either to remove them, or present proper applications for their detention; but that no regard had been paid thereto. Whereupon, the Meeting declare that, unless an application is either made by the relations of these persons or the Kirk-Session on their behalf, orders will be issued at next sederunt for their dismissal from the Hospital." 6th April: "There was produced and read a letter from — —, residing in Brechin, representing that he was wholly unable to contribute any thing to the support of — —, his sister (one of the two), presently in the Hospital. Whereupon, Mr. Paterson (minister) stated that the funds of the Kirk-Session of Montrose were at present so much depressed, that the Session were unable to do any thing for — — and — — (the other), and therefore moved that the case of these persons do stand over for the determination of the annual General Meeting in June next; which motion was seconded by Mr. Arkley, and unanimously agreed to,—*Mr. Paterson having declared*

that, if the General Meeting shall disapprove of the proceedings of this day, the Kirk-Session will pay what board may be ordered by that Meeting, not exceeding the rate of £10 each." Accordingly, on the 8th of that month, "Mr. Paterson having been heard on the part of the Kirk-Session of Montrose, as to the payment of the boards of these persons, the Managers, in consideration of the urgency of their cases, agree to allow them to remain in the Hospital until they can be disposed of by being placed on the gratis list, as vacancies may occur, or *as the Managers may afterwards direct.*"

Though pertaining to a different branch of the Institution, the following Minute exemplifies the position which these extracts are designed to substantiate. A Committee, appointed to consider what plans should be adopted for defraying the expenses of the Infirmary, reported, on 12th June 1821, to this effect:—"Resolved that all persons above the rank of Paupers shall pay board at the rate of one shilling *per diem* during their stay in the Infirmary. That every person who shall be certified by the Clergyman and two of the Elders of his Parish, to be a Pauper, shall be admitted at the rate of sixpence *per diem*,—the Session being bound for payment thereof. That *not more than two gratis Patients, belonging to the Town and Parish of Montrose, shall be in the Infirmary at any one time.*" These Resolutions were approved of and enacted accordingly; but the Meeting at the same time "declare that these Resolutions, and the rates of board thereby fixed, shall only continue in force until the annual General Meeting"—at which, however, and also afterwards, they were agreed to be continued. In point of fact, as must now, perhaps, be universally admitted, the Managers had entire freedom to make such laws, in regard to all departments of the Charity, as variable and varying circumstances seemed, in their judgment, to require; and this enactment, touching gratis Patients in the Infirmary, may be held as altogether parallel to the previous laws relative to similar admission into the Asylum,—the difference of number in the two cases being perfectly immaterial as to *power*. The necessity to have some laws on the subject was experienced throughout the whole history of the Establishment; and, though any of these might need revision or change at particular periods, it was the obvious duty of all concerned to obey them while in force. Now,

so far as appears, there never occurred any collision between the Managers and the Kirk-Session, or even a shadow of difference in opinion, on the nature of their relationship thus constituted. The former persevered in a course of services under regulations which they themselves appointed; and the latter, receiving as a boon what they could not have demanded as a right, were content to respect the terms on which alone it was dispensed. We shall find the harmony nicely maintained in the following case.

3d July of same year (1821): A letter from the father-in-law of one of the Patients having been produced, stating that he would not in future pay more than £10 board for her, and also that, if they thought proper, the Managers might take measures for compelling the relations to make up the deficiency, the Meeting direct the same "to be delivered to the Kirk-Treasurer, that he may lay it before them for their consideration, whether they will join Mr. — in making up the rate to £18 per annum, as required by the Regulations, until a vacancy shall take place in the £10 list. On 7th August next, "the Kirk-Treasurer reported that he had laid the letter before the Kirk-Session, and they had agreed to contribute such a sum as will, with Mr. —'s contribution, make up the board of his daughter-in-law to £18 per annum; but the agreement of the Kirk-Session was only for six months, with power to renew it." The matter did not rest here, as, on 5th February 1822, a representation having been made to the effect that Mr. — had refused to pay the board, &c., his letter of obligation was produced, and, together with some correspondence, directed to lie over for consideration at next sederunt. At this, it was again deferred, as also at a subsequent Meeting; when, however, the Managers directed their Treasurer to write to Mr. —, "to know his determination, whether he will continue to pay any part of her board or not." 7th May: The Treasurer reported having done so, and produced an answer, stating that Mr. — "would certainly give something, sometimes more, sometimes less, but not less than £5 per annum; whereupon the Meeting direct the Treasurer to intimate to Mr. — and Mr. — —, on the part of Mrs. —'s relatives, that, if security for the regular payment of her board be not produced by next sederunt, she will be dismissed from the Asylum." On 4th June, accordingly, the Treasurer stated his own obedience, and, in consequence, that "he had

received £10 from Mr. — (the father-in-law), to account of her board preceding 1st June, and £4 *from the Kirk-Session* for the same purpose, leaving a balance of £4, but that no answer had been given either by Mr. — or Mr. — —, as to her board in future." After consideration, the Meeting direct the Treasurer to state to Mr. —, that they hold him bound, not only for the balance, &c., but also for all subsequent board and expenses until she is removed by him, in terms of his obligation." Finally, on the motion of the Rev. Dr. Paterson, she was placed on the £10 list, in the room of another deceased. Here, then, as in numerous other instances—sometimes where the board was so high as £18 at first—we observe the Kirk-Session complying with reasonable rules, seemingly under a perfect confidence that the Managers would act tenderly, no less than justly, as exigencies allowed.

The Managers, properly alive to their own real deserts, made no scruple in advancing them when suitable occasions presented. Accordingly, being in want of additional ground, &c., and having directed their Treasurer to petition the Magistrates and Town-Council on the subject, he reported having done so (6th August 1822), in terms partly as follows :—" That, from the great benefit which the Town of Montrose has reaped, and is still reaping, from the Lunatic Asylum, by having ten Lunatic Patients always maintained in it *gratis*, and four at £10 each, independently of the advantages enjoyed from the Infirmary, and the great number of Paupers who are constantly supplied with Medicines, Flannel, and Wine, at the Dispensary, and receive Medical Advice gratis, as well at the Dispensary as at their own houses, amounting in some years to nearly one thousand, the Managers are humbly hopeful that your Honors will not only grant the ground wanted, but that it will be given free of any feu-duty or annual charge," &c. Now, though the reply was not exactly to the full amount of the petition, yet did it meet with nearly unanimous approbation (only two dissenting to a part) by the Managers—a decisive proof that they had neither assumed too much merit, nor were undervalued by those to whose judgment they had appealed. But while, in all fairness, the very nature of the request on this occasion and its success must be supposed to imply the purpose of continuing to act generously hereafter, still it is apparent that the Managers came under no pledge as to the exact kind

or amount of the bounties they would bestow, and left themselves at liberty, as in times past, to be more or less liberal, precisely according to their own sense of fitness and sufficiency under such circumstances as might happen to exist. Subsequent proceedings, accordingly, evinced the preservation of their original authority, intact and unassailable, to regulate the terms of admission; while, very certainly, they were at pains to obtain such information as might properly guide them in exercising it.

We have a good example of the kind in a Report from the House Committee, dated 30th August 1823, which, after setting forth the result of the inquiry into the rates of board charged at other institutions of a similar nature in Scotland, makes the following pertinent remarks:—"From this abstract it is apparent that there is not a single gratis Patient in any Lunatic Asylum in Scotland, except our own; that in none is the minimum board so low, except Dundee and Aberdeen, and in none lower except the last mentioned, which, under certain circumstances not fully specified in the information before the Committee, admits at £15. This, however, is more than compensated by the gratis, the £10 and £12 lists of the Montrose Asylum; *and it does not, therefore, appear to the Committee that the Public have any claim upon the Managers for a reduction of boards, on the ground of comparison with other establishments of the like kind.*" But, notwithstanding this position, the Committee, reasoning as to "*good policy*," inclined to think that a reduction in one of the rates—namely, from £24 to £20—"might perhaps be found for the interest of the Hospital itself;" and, with a view to a still higher, as well as more extensive advantage, they suggested the propriety of adopting a modification of the rule of the Quaker Establishment near York (the Retreat)—namely, a lower board for the first 12 months, in the cases of those Patients who were sent within six months of the attack of the disease,—reckoning the 12 months from the first appearance of the symptoms, rather than from admission into the House. The consideration of this Report—comprehending other suggestions—was deferred at the Meeting of 2d September 1823, and the House Committee were recommended to bring forward any additional information which they might possess. Part of it—not now requiring notice—was approved on 7th October following, when, in regard to the above subjects, the Meeting delayed

until a future sederunt; as also on the 4th November, at which date the House Committee, with the addition of other Managers, received authority to print and circulate a Report on the whole subject in March next, before being finally taken under consideration at the Annual General Meeting in June."

The document, which in fact did not appear till May 1824, recommended, similarly to its predecessor, the diminution of the lowest rate of board in the case of Patients from beyond the bounds of the Synod, and the charge, during six months, of only a half of the ordinary rate, fixed for their class, where application in behalf of Patients should be made within three months of the appearance of the disease, provided there had not been a previous attack. It merits attention on other grounds, which, however, as irrelevant to the present question, must be merely glanced at —namely, a decided opinion "that more might be done in finding occupation and amusement for the unfortunate inmates" than seems to have been effected up to the period; and a recommendation that "the charges of board of Patients admitted to the Infirmary, who cannot afford to pay, be abolished for one year—so that it may be seen what effect it will have upon the general expenses of the Institution."*

At the next Annual Meeting, when both Reports were fully considered, the reductions suggested in them, with modifications which need not be mentioned, were approved and sanctioned for one year. On 14th June 1825, again, "the (General) Meeting unanimously resolve to continue for another year the reduced rates of board, and farther that all the Pauper Patients now in the Asylum shall immediately be placed on the reduced rates, *on cause being shown to any Monthly Meeting that the circumstances under which they are admitted require it.*" We find, moreover, that the same Meeting "unanimously continue the regulations under which the Infirmary is open to poor people gratis; but with this proviso, that, in future, those parishes which make collections for similar institutions elsewhere, will be expected to pay board at the rate of 6d. per diem for such persons as they may send to Montrose."

* This last suggestion is founded on the fact—deduced from early reports—that, though "the Hospital was erected principally for the relief of those poor unhappy persons who are deprived of reason," yet, under conditions—as to room and funds—the benefits of an Infirmary, in the ordinary sense, were also intended and administered.

On 13th June 1826, "the Meeting agree to continue the same rates of board for another year:" as likewise on 12th June 1827, when, however, the House Committee was recommended "to take the subject of board under their consideration, and report to next Monthly Meeting." But, apparently neglecting to do so, and the (General) Meeting of 10th June 1828 "having taken into consideration the present rates of board"—a motion to raise the minimum rate for Patients within the Synod to £18 was lost on division—an amendment "that the present rates be continued" having obtained a majority.

On 9th June 1829, the subject was again resumed so far as to be remitted to the consideration of the House Committee, instructed to report to a Special General Meeting in November; while a proposition "that from every parish in the Presbyteries of Brechin, Arbroath, Fordoun, and Forfar, who shall make an annual contribution, &c., Patients admissible by the rules of the House, and not labouring under contagious diseases, shall be received into the Infirmary gratis, and from no other," was unanimously agreed to. The Report, consequent on such remit, is really so luminous, and at the same time brief, as to merit quotation throughout.* It was printed and circulated, with a view

* REPORT.—"31st October 1829: The Receipt and Expenditure for the year ending June last, appears a fair average for many years past, taking into consideration the increased number of Patients admitted since the additional accommodation was provided, and stands thus:

RECEIPT.				EXPENDITURE.			
From Lunatic Boarders..	£950	18	10	Household Expences.....	£1166	18	10
Infirmary Patients...	9	13	6	J. Booth (gratuity).....	10	0	0
Donations.....	18	4	2	Profit and Loss	37	15	3
Interest Account.....	235	17	7				
	£1214	14	1		£1214	14	1

In the Household Expenses, the following sums appear to belong principally to the Dispensary, viz.:

Additional allowance to Surgeons on this Account.....	£30	0	0
Do. to Mr. Ingram (as Apothecary).....	20	0	0
Wine	13	1	0
Medicines.....	57	7	10
Flannel.....	41	8	9
Mr. Ingram's Account includes on this Account.....	4	8	5
	£166	6	0
Suppose part of these are required for the House—say deduce	20	0	0
	£146	6	0

By deducing the Dispensary Expenses from the Household Expenses, it leaves for the Asylum and Infirmary £1020. This sum, divided among 61 Lunatic and 7 Infirmary Patients (being the average number for last year), makes the average expense of each £15.

to full consideration at next General Meeting, when (8th June 1830) "the Meeting approved of the Committee's suggestions, with this alteration, that although the minimum rate of board for Patients of a better description, is recommended to be £25 per annum, yet it shall be in the power of the Managers, at Monthly Meetings, to reduce

The Expense of the Infirmary, therefore, will stand thus:	
7 Patients at £15	£105
The Surgeons receive on this Account	25
The Sick Nurse, with a share of other attendants, may be reckoned	25
	£155

In this view, the Expense of each Department is as follows:

Asylum	£865
Infirmary	155
Dispensary	146
	£1166

The number of Patients now in the Asylum amounts to 59; and the following statement shows the gain or loss upon each class, according to the foregoing data of cost, at £15 each:

Number of Patients.	Sums paid.	Gain.	Loss.
10 Gratis Patients, Montrose	£—	£—	£150
4 from Montrose, pay	40	—	20
4 from Country Parishes, pay	43	—	17
2 pay together	28	—	2
28 from £16 to £20	486	66	—
6 from £20 to £30	145	55	—
5 from £30 to £40	186	111	—
	£928	£232	£189

From these states it appears that the minimum rates of board, now fixed at £16 and £20, are sufficient to pay even a little more than the actual average expense of the individuals; and, therefore, your Committee would recommend that they should be continued. These minimum rates, however, they conceive, should only entitle the persons so admitted to the comforts of the common Ward. Those who require the best Ward should pay for their additional comfort; and the minimum rate of admission for that Ward your Committee think should be fixed at £25, whether within or without the bounds of the Synod. They do not mean that this rule should apply to those already admitted, farther than that there should be a careful examination into the circumstances of each individual patient; and where it is found that a higher rate can be afforded, it should be demanded.

(Signed) A. Thomson, Wm. Dorward, Wm. Gordon, George Willis, Willm. Gibson."

Supposing the above calculation to be correct, and keeping in view former evidence as to relative participation in the benefits of the Infirmary and Dispensary, it may be confidently asserted that at this period, as at other times, Montrose was deriving an advantage from the Institution equal to, if not more than, the full amount of its free interest; for, while the latter is stated at £235 17s. 7d., the *loss* on account of Patients in the Asylum alone was £170,—to which must be added, at the very least, £100, being about a third part of the expense incurred by those who were supplied at the other branches of the Charity. Now, to show in a single sentence what is aimed at in the text throughout so much detail, let it be observed, that even the former sum (£170)—regarded as the burthen, for a single year, on account of Montrose Patients in the Asylum alone—is only £2 4s. 9d. less than the entire amount of contributions or collections from the Town Churches (of all kinds) between 1st June 1830, and 1st June 1839! The Appendix will evince another fact almost, if not altogether, as claimant.

this sum, where the circumstanees of the parties shall appear to require it: at the same time, the Meeting direct that all cases wherein any reduction takes plaee shall be reported to the next General Meeting." The Regulations touching admission into the Infirmary were continued, and, "in respect of the great benefit derived to the eountry at large" from this branch of the eharity, it was agreed, that, besides communicating information to them on the subject, the clergymen throughout the Presbyteries should be requested to continue their eollections.

No change as to any of these particulars was made at the General Meeting, 14th June 1831, or at the succeeding, 12th June 1832, when, however, it was agreed that the word "congregation" should be substituted for "parish," in the late regulations respecting the Infirmary. On the 11th June 1833, the same rates of board for Lunatic Patients were continued in foree; and "the Managers resolve that, in future, no Patient shall be received into the Infirmary, unless from parishes or congregations who shall make a colleetion or contribution in aid of the funds of the Institution within six months from this date." A similar remark applies to the Meeting of 10th June 1834, with an additional peculiarity in regard to the last branch—namely, fixing "the rate of charge for Patients, admitted under other circumstances (than the *parochial* formerly mentioned), at 1s. per diem." * On the 9th of June 1835, the rates were again continued in foree; and also, though only by a majority of 13 to 8, the Managers resolved, in addition to the late arrangement respecting the Infirmary, that the charge for Patients, not privileged, should be one shilling per day—a regulation to be enforced in future against all Parishes or Congregations (which did not contribute) without exception." No alteration of any kind, in regard to these points, was proposed on 14th June 1836, when, however, a Committee was appointed to consider and report

* It is proper to state, that a *protest* by two of the Managers against the appointment of a Medical Superintendent, with a higher salary than had been allowed to the previous functionaries, agreed to at an Extraordinary Meeting, 5th May of this year, asserted that it could not be gone into "without serious injury to the funds of the Institution, and an encroachment upon its capital, or diminishing the number of gratis Patients in the Asylum belonging to the Town and Parish of Montrose, which it is entirely incompetent for the Managers to do, *as by the original and fundamental regulations of the Institution, it is declared 'that as the Town and Parish of Montrose have contributed so largely to this Charity, the poor Lunatics belonging to them are always to be admitted gratis and in preference to all others.'*" In the total absence of authority by extant minutes, it is impossible to credit so strong and unqualified a proposition, which, accordingly, seems to have had little effect on the Meeting.

as to the propriety of separating the Infirmary from the Asylum—a measure which was likely to be accompanied with some modification of charges. There is, accordingly, a passage to the following effect in their Report, dated 31st December of same year, read on 3d January 1837 :

" Your Committee have also examined the present rates of board from the Lunatic Patients; and they find, on the 1st December of the present year, there were 67 Lunatic Patients paying board as follows :

1 at £40.	2 at £24.	3 at £12.
1 ,, 36.	4 ,, 20.	4 ,, 10.
2 ,, 35.	8 ,, 18.	1 with board com-
3 ,, 30.	24 ,, 16.	promised, and
3 ,, 25.	1 ,, 15.	10 Patients gratis.

" As the Asylum, since the present rates of board were fixed, has got the benefit of regular Medical attendance to the Patients, your Committee are of opinion that those rates of £18 and upwards might, on the first occasion, be raised and altered to the benefit of the Institution; and, in the meantime, the Committee would suggest to the Managers whether some charge for the present year might not be made under the name of a Medical fee. For example, the seven Patients paying £30 and upwards to be charged, in addition to the rate of board, £2 for Medical attendance—this would produce £14; and were 17 Patients, paying from £18 to £25, to be charged in like manner £1 in addition to their board, it would be £17—making together £31, in addition to the funds of the Asylum.

" Your Committee cannot close this Report without adverting to the heavy burden upon the Institution of maintaining ten persons gratis. Were even partial board obtained for them, or the number diminished, the Institution would be better able to hold out a helping hand to the New Infirmary, to provide better accommodation for the Sick Poor, and in some measure to prevent disease, by having the means of checking it upon its first appearance."

So far as related to the subscription of one thousand pounds for the purpose of aiding in the erection of a New Infirmary, and a few connected points, the Report, embodying these suggestions, was approved at a special General Meeting on 7th February 1837; but the subject of boards was not then taken up. On 2d May thereafter, however, notice was given that, at the next annual Meeting, there would be a motion for the appointment of a

Committee "to revise the rules and regulations of admission into the Infirmary;" while the Meeting requested "the House Committee to bring up a Report on the different rates of board now payable for Lunatic Patients, and of any increase that should in their opinion be made thereon." But, quitting the motion, as comparatively unimportant, we come to the special views of the House Committee, presented on 13th June of the same year, and must necessarily exhibit them at full length:

"The Committee, perceiving the excess of expenditure beyond the income for last year, would respectfully submit to the Managers the propriety of declining to receive Patients from a distance at low rates of board—perhaps not under £25 per annum, in any case; and also of the necessity of advancing the present rates for board. A schedule of the advance on present rates, proposed by the Committee, accompanies this Report, for the consideration of the Managers.

"In order to lay before the Managers the benefit derived by the public from the low rates for board for the Lunatic Patients, let us take the actual average cost to the Institution of each Patient, of.....£18 2 4
And add for house-rent or lodging..... 3 0 0

Average cost for each, including lodging...£21 2 4
Now, the average rate of board, actually received,
for year ending June 1837, is only.....£15 12 6

"Thus it would appear, from the above average expense, that there is a loss to the Asylum—

On the 8 Patients at	£18,	of	£3	2	4	each, or	£24	18	8
,, 24	,,		16,	,,	5	2	4	,,	122	16	0
,, 1	,,		15,	,,	6	2	4	,,	6	2	4
,, 3	,,		12,	,,	9	2	4	,,	27	7	0
,, 4	,,		10,	,,	11	2	4	,,	44	9	4
,, 10	,,		gratis,	,,	21	2	4	,,	212	3	4
							Making together.....		£437	16	8

"It would appear that all the benefit derived to the Asylum, from the higher rates for board, is given to the public, which your Committee would respectfully submit ought not to be the case.

"The Committee would wish to lay before the Managers the state of the Dundee Asylum (which has a proportion

of Pauper Patients) as compared with the one here. In the year ending March 1835, the Dundee Asylum had an excess of income over expenditure of £731 17s. 5d., and this too after paying the interest of a debt of about £7000; while it would appear that, on the Lunatic part of the Institution here, for year ending June 1836, there was a deficiency or loss of £31 4s. 9d., without taking into account any rent for the House, and that at a time when provisions were considerably cheaper than they are at present.

"Schedule of proposed advance on the rates of board for Lunatic Patients referred to (as above-mentioned):

"All those Patients, at £16 and under, to be raised £2 each, including £2 for each of the gratis Patients.

"Those at £18, advanced to £20, if within the bounds of the Synod—if beyond, to £25.

"Those at £20, in like manner, to £22 or £25.

,, at 24, to be advanced to 27.
,, at 25, ,, to 28.
,, at 30, ,, to 35.
,, at 35 & 36, ,, to 40.

"This advance, if adopted, would add about £150 a-year to the income of the Asylum."

In reference to this scale, and, of course, the suggestions of the Committee, the General Meeting—consisting of twenty-three Managers, including two of the Ministers of Montrose—resolved, without division, "that all Patients at present paying £16, and under, of board *(including gratis Patients)*, shall be advanced £2 annually; that the minimum rate of board for all Patients within the bounds of the Synod shall in future be £18, and for all beyond those bounds £24 per annum; and that it shall be open to the Managers, at their Monthly Meetings, to take into consideration, from time to time, the propriety of increasing the boards of Patients, at present in the House, under or above the rate now fixed; and that these regulations, so far as regards Patients in the House, shall take place on the 1st of December next." At a Monthly Meeting on 5th September following, the Managers accordingly drew up a list of Boarders, with their respective rates, and instructed the Treasurer to advise their relations of the advances agreed on; while, as in former times, the rates of board, in the cases of persons admitted at Extraordinary Meetings, were left to be fixed at succeeding Monthly Meetings. At the two Annual Meetings held since, the

subject of rates was not mentioned; and, consequently, those now specified remain in force, under such qualifications as to the Managers may seem right in particular circumstances.* Practically, therefore, to terminate this branch of inquiry, and to render as prominent as it deserves to be the principle with which it set out, the Managers—resting, in the first place, on the words of the Charter, whereby they are entitled "to make and constitute such Bye-Laws, Ordinances, and Regulations, for the management and government of the affairs of the said Institution as to them shall seem meet, providing the same be not contrary to the true interest and meaning thereof, nor repugnant to the laws of this realm"—may, secondly, appeal with unhesitating assurance to the entire history of their proceedings, so far as respects admission to the benefits administered, in proof of their having invariably preserved, and, consequently, now possessing, a power which is obviously no less essential to the welfare of the Charity than conducive to the right discharge of their duties, though, in the very nature of things, the exercise of it must heighten their responsibility as public functionaries. One source of consolation will be open to them—aside from the relief accessible to those who are unjustly censured—should the state of the funds under their care—by no means their own fault, and, still less, their inclination—demand farther restrictions and higher rates than they have hitherto imposed. The most strenuous opposers of compulsory assessments for the poor, it is well known, make a reservation in behalf of the Insane, for whose calamity, they admit, there is both a political and a moral obligation to provide effectually. If, then, the "more excellent way," to which the Managers address themselves, in the first instance, with all the hope that past experience and a deep sense of utility inspire, should not prove availing to the full amount of exigencies, they must feel themselves completely justified in adopting measures whereby an inconvenient and really intolerable burthen shall be transferred from the Institution to the community

* The discretionary power, ever retained and occasionally exercised by the Managers, was particularly manifested (1st August of same year) in the case of an application to admit a deaf and dumb woman from a distant parish:—"On considering which, the Meeting direct the Secretary to write to — — (Kirk-Treasurer), that, as it is contrary to the Rules of the Institution to admit Idiots, the Managers refuse the application—believing the Patient to be in this state; and, at all events, should the contrary be certified on soul and conscience, the circumstance of her being deaf and dumb calls for additional attendance, and therefore the rate of board cannot be less than £24 per annum."

at large. Doubtless, in this deprecated event, some dissatisfaction may have to be encountered. But it can only be reasonable where it is least likely to arise—namely, among those—unhappily, it may be, not the most numerous portion of society—who, listening to the cries of humanity, and believing "it is more blessed to give than to receive," already, to the extent of their means, contribute, "as free-will offerings," what, if their example were universally followed, would obviate the necessity for legal exaction.*

Having thus elaborately, and, it is hoped, effectually, disposed of a question on which a just conclusion is highly important to the community no less than to the Managers, our attention must be directed towards some other particulars in the history of this Institution.

Former statements in the sketch now given, compared with the appearance of the House, imply successive and material extension beyond the original design. In reality, the dimensions and capacity of the building have been more than doubled in the course of the present century; and, though by no means so large or perfect as to compete with various recent edifices of the kind, its exterior aspect and internal arrangements have shared, partially at least, in modern improvements; while, in regard to liberality of admission and general usefulness—as already evinced—its Guardians may seem entitled to some commendation by their townsmen. But, be this awarded or not, they were actually compelled, on one occasion, to speak strongly in behalf of the Institution itself, and, in respect of its merits, to solicit certain immunities for the inhabitants of Montrose. The fact, which is not without interest, can be mentioned in a few sentences, because previously adverted to, though only in an incidental manner.

A Bill, the object of which was the establishment of

* It is of consequence to keep in view the spirit and intent of the laws of Scotland respecting provision or allowance for the Poor. "Some," says a very competent expounder—namely, Mr. Monipenny (late Lord Pitmilly)—"may have such claims on relations, or expectations from them, that, although unable to work, and without any means of their own, no parochial assessment can be demanded by them. Others may have claims or expectations to a limited extent, and which require to be eked out by certain small allowances from the parish, the amount of which must be regulated by the circumstances of each case. While there may be some, but they are few in number, and *chiefly persons deprived of reason*, or of all power to work, and totally destitute of means, *to whom a suitable aliment must be assigned, undiminished by reference to any separate funds whatever.*" (Remarks on Poor Laws, &c., Ch. III.) Kirk-Sessions are absolutely bound to make entire provision for such cases, the claims of which are admitted, on all hands, to be quite indefeisible.

Pauper Lunatic Asylums in Scotland, having been brought into Parliament by Lord Binning (now Earl of Haddington), the Managers apprehended several evils were likely to arise from it—so far as the Charity under their care was concerned—and, therefore, judiciously prepared measures for defence. One of these was a Memorial, which, *inter alia*, stated :—"From among these Managers (enumerated as in the Charter), who have at all times access to the Hospital, a House Committee, consisting of five, is annually appointed for superintending the economy of the Establishment, and enforcing a strict observance of the Regulations laid down for the internal management of the Institution. Two Medical Practitioners are appointed annually, with salaries, for attending upon the Patients; and it may be proper to mention that, according to the Bye-laws, no Lunatic Patient, whatever his circumstances or situation in life may be, can be admitted into the Asylum until an application, in writing, is laid before the Managers at their Monthly Meeting, along with a certificate of Lunacy, signed by two regular Medical Practitioners. For improving the accommodation and adding to the comfort of the Patients, the Memorialists, in the course of last year (1817), laid out about £2000 in addition to £3100 expended on the original erection of the Institution, (comprehending, of course, all subsequent expenditures thereon, up to the period of the document.) The Asylum at present contains fifty-four Lunatic Patients : ten of these, being Paupers from the Town and Parish of Montrose, are supported at the expense of the Establishment, and four from the said Town and Parish at £10 per annum. Besides these, there are four from the neighbouring Parishes, recommended by Kirk-Sessions, who pay only at the rate of £12 each yearly of board, and several more who, from various circumstances, are kept at an under board. The management of the Montrose Lunatic Asylum has given such general satisfaction, that Patients have been sent from London, Edinburgh, Glasgow, Aberdeen, and Inverness, although at all these places there are similar Establishments. From the present state of the funds belonging to the Institution, the Memorialists have every reason to think that these funds are adequate to the support of all the poor fatuous and furious or insane persons belonging to the Parish of Montrose, as well as to enable them to afford such assistance to the Parishes in the neighbourhood as they have been in the practice of doing."

Proceeding on these grounds, it was natural for the Managers to desire, and even expect, that their Asylum should "be exempted from any operation of the proposed law, and allowed to remain on its present footing." His Lordship's reply (27th January 1818) showed that actual merits were not unknown and would be appropriately respected. "I hasten to thank you for your communication," said Lord B. (addressing Dr. Paterson, who had transmitted the Memorial), "and to assure you that you need not fear any invasion of the chartered rights of your Institution from my intended Bill. The County in which it is situated is peculiarly well supplied with such Institutions, compared with other Districts. Indeed, had the rest of Scotland been as well provided, nothing could have been requisite but a Legislative provision in aid of existing establishments." Every one, who has the slightest knowledge of his Lordship's good sense and candour, will perceive that this admission implied high, because, in all probability, just, estimation. But as, for reasons not exactly creditable to Scotland, an opposition sufficiently cogent induced him to abandon the Bill entirely, leaving a large class of unhappy beings totally unprovided for—the intention of the Managers to petition Parliament against it, or rather "for an exemption in favor of the Town and Parish of Montrose," became unnecessary. A letter on the subject (2d May 1817) from Mr. James Farquhar, M.P., to whom a Committee of their number had written, mentions that his Lordship purposed giving up his bill for that year; while, if it were not withdrawn, he "had it in contemplation to exempt the County of Forfar, or any other having already an Asylum, from the general effect of the bill, subjecting the Asylum to proper regulations only." The Meeting at which this was read (6th May) accordingly resolved to proceed with certain additional buildings previously agreed on, but suspended till satisfactory information, as to what was pending, should be obtained. On a renewal of efforts towards accomplishing the same or a similar design, there took place a correspondence between the Managers in Montrose and those of the Dundee Lunatic Asylum—the friendly nature of which, together with the views of the former, may be shown by a quotation from the Minute of 3d March 1818. "Mr. Duncan laid before the Meeting a letter which he had received from Dr. Nicol of Mains, whereof the tenor follows:—'Sir,

At a Meeting of the Managers of the Dundee Lunatic Asylum, held yesterday (18th February 1818), in order to consider the Draft of the Bill sent down by Lord Binning, and some propositions accompanying it, a clause was drawn up, which I was requested to send to Lord Binning in the name of the Managers, and solicit its insertion in the Act. Mr. Maule (now Lord Panmure) was present as a Manager at this Meeting, and the clause was drawn up with his approbation and seconded by him, and he promised to use his exertions for having it carried into effect. It appeared to the Meeting that it would be unfair on their part to propose any clause in which Montrose Asylum should not be included, and therefore it was so drawn up as to answer every purpose which, according to our information, your Managers had in view, which was—*just to be let alone.* On our part, this was done from the best intention; but, if it has not been properly done, then you have only to let me know, and I shall instantly write to Lord Binning that we have done wrong, and that he must not take this part of the clause as given by us.' Which letter, and the clause therein referred to, having been considered by the Meeting, they are unanimously of opinion that the clause transmitted by Dr. Nicol does not correspond with their views, being resolved to use their utmost endeavours to remain unconnected with any other establishment, according to the chartered rights of this Institution, and request Mr. Duncan to forward to Dr. Nicol a copy of their Resolution, and in their name to thank the Managers of the Dundee Asylum for their attention in proposing to include the Montrose Asylum in the clause."

It appears from a communication of a different kind, that, though Lord Binning's labours failed as to their main object, they excited greater regard to Pauper Lunatics than had been previously manifested, and some tendency to agree in measures for their welfare. Thus—3d November 1818: "'The Treasurer laid before the Meeting the following letter which he had received from the Sheriff-Clerk of Clackmannan:—' Alloa, 26th October 1818: Sir, The Heritors of the County of Clackmannan being desirous of joining a Lunatic Asylum, so as to have it in their power to send their Lunatic Poor to it, have directed me to request you will inform me if the County can be permitted to join the Lunatic Asylum at Montrose, and on what terms,' &c.; which letter having been read, the Meeting

remit the same to," &c. &c. "as a Committee to take the subject under consideration, and to procure such information as they shall think necessary in their Report,—which the Meeting appoint to be produced so soon as it can be made up." But no farther proceedings thereon are recorded in the Minutes. Before closing this subject, it is worthy of notice—as connected with the question to which so much attention has been directed in these Memoranda—that, in preparing materials for a petition to Parliament, one suggestion expressly recognized an obligation which Lord Binning's proposed measure would have enforced in a different manner. It is in these words: "If the number of Pauper Lunatics shall hereafter unfortunately so increase as to make the funds of the Institution inadequate to their support, the inhabitants of the Town and Parish of Montrose should be permitted to assess themselves annually for raising such sum as may become necessary for defraying the extra expense." Perhaps at any time, and under all circumstances, *voluntary* is preferable to *compulsory* assessment; but, in regard to the insane, the latter may be no less necessary than it *is* legal.*

* The history of Lord Binning's Bill or Bills is fraught with deep and somewhat painful interest, but, of course, cannot be dwelt on here. Probably, nevertheless, some allusions to it, in his Lordship's own words, many years afterwards, may be deemed valuable. They were communicated to the writer of this Sketch, when engaged in endeavours towards erecting a Metropolitan Asylum, as Convener of a Committee of the Royal College of Physicians, appointed "for the purpose of investigating the condition of Lunatics in and around Edinburgh, more especially such as are Paupers, or from the lower ranks of life, with a view to an extensive establishment for their accommodation."

"Tynninghame, 29th November 1834.

. . . "You request of me" to suggest difficulties and encouragements "in the way of your humane undertaking. My own experience would enable me to suggest one very great difficulty, if it is any part of your plan to extend your arrangements beyond one County or City. I endeavoured (and I attempted too much) to carry a Bill for District Asylums in Scotland generally—so as to comprise the whole Country in my scheme—calling upon a certain number of Counties to contribute to one Asylum,—more Counties being united together in the poorer parts of the Country than in the richer and more densely peopled. I met with very little support among the Commissioners of Supply, who convened in every County to oppose any such plan of compulsory assessment; and I was obliged to give it up. I would therefore, from my own experience, warn you against too extensive a plan of operations, and against all compulsory assessment. If the Counties were against my proposition some fifteen years ago, they are quite as likely to resent any such project in times like the present. I know not what encouragements to suggest, except those derivable from the sense the public may be brought to entertain of the propriety of giving due support to an institution such as you propose in Edinburgh. Of the want of it, there can be no doubt; and if your measures are taken prudently, and you can interest persons having local influence in the success of your undertaking, there seems no reason to doubt of your ultimate success. It is so long since my mind was turned to this subject, that I really have no suggestions to offer worthy of your attention; and I must therefore confine myself to warning you off the rock on which I split—attempting too much at once. I believe the

Previously to Lord Binning's movements, the Legislature, as is well known, had been seriously engaged in inquiries respecting the condition and management of insane persons throughout portions of the empire; and in consequence, as might have been expected, there were disclosures of sundry evils which called loudly for remedial or preventive measures. One of these—for it would be equally impossible and needless to enter on the whole subject here—was "An Act to regulate Madhouses in Scotland," (7th June 1815),—the general nature and chief provisions of which may be understood from the following analysis:—

County of Edinburgh would not have been adverse to my plan, and would have submitted even to an assessment, had I confined myself to an Asylum in or near Edinburgh."

The opposition, though effectual, was not quite universal,—the County of Forfar, *e.g.* having, in one sense, conceded the *general principle* of the bill—and Edinburgh, as the above passage states, having admitted its applicability. But, passing by other facts, his Lordship's remark as to *compulsory assessment* would furnish matter for very nice discussion. Thus, on the other hand, one of the Lords of Session, who also was kind enough to notice the Writer's labours, expressed himself as follows:—"I have no doubt of the advantage of such a measure, not for every County, but for districts of Counties; but I see no chance of Asylums for the Poor being built or supported but by assessment. The assessment, I think, should not be confined to the land, but should embrace inhabitants of towns and villages, according to their 'means and substance,' as our Poor Laws term it, above a certain amount; and I am also inclined to think that the Asylum should not be restricted to the poor alone, but that it should be combined with accommodation for a higher class of Insane also. A great establishment of this kind would obtain and admit of a more undivided attention of the Medical Superintendents, as well as probably secure a more kindly treatment from the inferior attendants to Pauper Lunatics, than if they alone were inmates of such an Institution. But perhaps experience does not justify this opinion. It would also be cheaper, as part of the expense of superintendence necessary, though not occupied by the poor, would be defrayed by those inmates who contributed for their board."

While no one can or does dispute the actual existence of, and the necessity for, compulsory support of Pauper Lunatics, as involved in the *general assessments* wherever these are established, unless, as in the case of Montrose, the purpose be fulfilled otherwise, the expediency and advantage of separating a portion from the common fund and directing it to the special object, or of imposing a distinct rate solely on that account, must obviously be determined by the circumstances of different cases—not by abstract principles common to the whole.

Without adverting farther to his own labours, the writer may be permitted to quote the language of a Professional Gentleman who had ample occasion to judge of them:—"The steps which were taken by a Committee of the College of Physicians here (Edinburgh), at your suggestion, for the improvement of the accommodation for Pauper Lunatics in this part of the country, although they have not had exactly the effect which you anticipated, have opened a prospect of great improvement in that respect, which I have no doubt will, sooner or later, be realized, and reflect much credit on you as their proposer." (Testimonial of W. P. Alison, President of the Royal College of Physicians, Professor of the Theory of Physic, &c.) Dr. A. alludes to the proposed extension of the Asylum at Morningside, which, however desirable or really useful it may be, the writer still conceives, for reasons easily mentioned, not the most eligible mode of freeing Edinburgh from just and long-continued censure; and he has grounds for believing that, though overruled, or rather perhaps taken unawares, by a body whose zeal their own dilatoriness had awakened, many of the Directors concurred in his opinion.

Clause 1 empowered Sheriffs, &c. of every Court and Stewartry to grant licences, in a specified manner, for the reception, the care, and confinement, of furious and fatuous persons and Lunatics within their respective jurisdictions: 2 declared it unlawful for a person to keep a madhouse, without having a licence to that effect, granted and received in the manner directed, &c., under heavy penalty: 3 enacted that the licences for the purposes named should be renewed every year—certain charges for the same being fixed: according to 4, Inspectors were to be chosen or appointed by the Royal College of Physicians, Edinburgh, and the Faculty of Physicians and Surgeons, Glasgow, any of whom should be employed: 5, by the respective Sheriffs, &c., in periodically visiting houses kept for the reception of Lunatics, &c.,—and, failing of whom, under local circumstances, the Sheriffs were authorized to employ, for the same purpose, either Members of the Royal College of Physicians of London or of Edinburgh, or of the Royal College of Surgeons of Edinburgh, or Medical Men having its diploma, &c.; while 6 provided for like object, still more largely, in other circumstances which rendered it necessary to employ any Medical person or persons of character,—reasonable allowance for attendance and trouble being made: by 7, it is enacted that Sheriffs, &c. should take measures for ascertaining whether any persons confined in such houses ought to be therein, as being furious, fatuous, or lunatic, and to make such order for their care, or (otherwise) being set at liberty, as circumstances may require: 8 relates to orders for the reception of Lunatics—namely, by Sheriffs, &c., who must satisfy themselves as to the propriety thereof, by certificates from Medical persons, who again are bound, under penalties, to proceed on due examination of the parties, &c.,—the certificate or report, signed by a Medical person, being that document: 9, on which the Sheriff's order for confinement is founded; though, in certain circumstances, 10 provides for an *interim* order as to the care and confinement of Lunatics, &c. during a limited period: according to 11, madhouses are to be inspected, at least twice a year, by the Sheriffs, &c., with Medical persons,—the Sheriffs, &c. however, having power to inspect as often as they may think proper; while, according to 12, the Medical Inspectors, appointed by the College, &c., may also, with concurrence of the Sheriffs, &c., but at their own expense, visit such houses: 13 authorises

Sheriffs, &c. to set persons at liberty who appear to be improperly detained: and by 14, Sheriffs are empowered, if they see cause, to recall any licences for keeping mad-houses which may have been granted pursuant to the Act: in terms of 15, they may make such rules and regulations for the management of these houses as tend to the welfare of persons confined in them, and enforce the same under penalties; provided, according to 16, such rules, &c. are transmitted to and approved by the Lords Commissioners of Justiciary: but 17 declares that nothing contained in the said Act "shall extend, or be construed to extend, to any of the Public Hospitals or Public Asylums in Scotland, further than to authorise the said Sheriffs or Stewarts to visit and inspect the same;" while 18 also exempts from its operation "any house where only one furious or fatuous person or lunatic is confined, unless such person shall be confined in such house for gain or reward:" by 19, the Procurator-Fiscal is empowered to enforce the Act, and recover penalties for infringing it; these penalties, 20, being payable into, and forming a part of, the Rogue Money of the County, &c.: in terms of 21, Sheriffs, &c. are to transmit their accounts of expenses incurred, &c. to the Commissioners of Supply; and, according to 22, a copy of these accounts, with a report of all that shall have been done in execution of the Act, containing a statement of the number of houses, &c., "and the names, number, and description of persons confined therein," is to be transmitted by every Sheriff, &c. "to the President of the Royal College of Physicians in Edinburgh, and also to the Clerk of the High Court of Justiciary at Edinburgh, who shall cause such account and report to be inserted in the Records of such Court: lastly, 23 and 24 are usual clauses—as to the powers granted being without prejudice to all powers, &c. competent by law—and as to the Act being a Public Act, &c.

The general purposes of the Legislature—as inferred from this deed—being no less salutary than obvious, every benevolent reader will feel some anxiety to learn how far they have been effected. Here, however, only a small portion of the entire subject can be deemed patent to the Writer of this Sketch; though, for a reason which it is not improper to mention, both inclined, and to a certain extent enabled, as will appear, to enter on the field at large. It so happens that, having been, as elsewhere stated, Con-

vener of a Committee of the Royal College of Physicians, appointed for the purpose of investigating the condition of Lunatics, &c. (see Foot-note, p. 49), the whole of the Accounts and Reports which, according to the Act—clause 21—have been transmitted to that body, were subjected to his frequent and most earnest examination. Considering, therefore, that, with one exception (the Report of the Parliamentary Committee, *printed* June 1816), all these documents are in manuscript, and must be deemed in one sense strictly private, though unquestionably designed for public behoof, it may be supposed he will rather feel embarrassed with the delicacy of disclosure than be in want of materials for it. The remark, nevertheless, must be qualified, because—setting aside the Reports relative to Lunatic Establishments in and near Edinburgh, which are both regular and very minute—he is under the painful necessity of saying—wherever the blame attaches—that a most important part of the duty imposed by the Act in question has been long and grossly neglected. Will it be believed, in the face of clauses no less perspicuous than they seem to be imperative, that, during many years, only *three* of these functionaries, throughout the whole kingdom, have sent in the enjoined Returns to the College of Physicians—namely, the Sheriffs of Edinburgh, Forfarshire, and Aberdeen; that, saving in the first of these, as already hinted, the series has been sadly interrupted; that, as if by common consent, (still excepting Edinburgh, at least till of late years, when only *initials* have been given), "the names and descriptions of persons confined" are *not* recorded in these documents; and that, consequently, the public interest and security, aimed at by the respective enactments, have been so far overlooked? Leaving these free and fearless animadversions to operate as they may—even to provoke inferences as to the likelihood of other and possibly greater omissions—he holds himself quite at liberty to give various extracts relative to the object in view. They will unavoidably occasion both repetition and some derangement of chronology.

1st May 1818: "Besides examining the different houses for which licences were taken out, the Reporter has also thrice visited the Lunatic Asylum of Montrose since the date of his last Report to the Royal College, and has now to state for their information, that different improvements and alterations have been made on this Asylum during the course of this last year. As, however, these improvements are

not yet completed, the Reporter deems it unnecessary to trouble the Royal College with any account of them at present, as he conceives it will be better to give a distinct account of these improvements when they are all completed. There are at present 53 Patients in the Montrose Asylum. Of these, there are in a state of imbecility or idiotism, 4
in a state of general insanity.....49
— 53

24 of the above Patients are paupers: 11 of these are kept gratis; one is kept in consequence of a legacy of £200 left to the Asylum for that especial purpose; and the other 12 are kept at a reduced rate of board paid by the Kirk-Sessions of the Parishes to which they belong. At the different times he inspected this Asylum, the Reporter had every reason to approve of the general management of the Asylum, and of the attention paid to the Patients."

The Report is signed by Mr. Adam Duff, then Sheriff-Depute of Forfarshire, and soon afterwards of Edinburgh, —in which latter capacity, as the Writer well knows, and could amply show, he has long continued to officiate most energetically, and no less beneficially, under the instructions of the Act. It is to be regretted that his intended account of the improvements to which he alludes, if ever drawn up—which is doubtful—was not communicated to the Royal College; and, unhappily, the immediately succeeding Reports are entirely silent in regard to the Asylum. Moreover, though others of later date appear to have been made, yet, in consequence of a neglect somewhere, we must pass of necessity to the "Spring of 1831" for the next notice:* "The Sheriff-Depute visited the Public Hospital at Montrose in Autumn 1830, and the Dundee Asylum in Autumn 1830 and again in Spring 1831; and the Sheriff-Substitute visited the Montrose Asylum in Spring 1831. Both of these Establishments are kept in the best order, and the Patients well attended to. In visiting the Montrose Asylum, the Sheriffs were attended by Mr. Hull, M.D., &c. The Weekly Registers (enjoined by another and recent Act) of both Asylums were produced to and subscribed by the Sheriffs. *The mode in which the Montrose Asylum is managed has been described in former Reports.*"

* It is only justice to say, that, so far as appears, neither Mr. L'Amy nor his highly respected Substitute, Mr. Robertson, can be supposed even cognizant of the deficiency now alluded to.

Autumn 1832: "The Asylum at Montrose was clean and well-aired; and the Patients well attended to by the Superintendent and Matron, and those acting under them. The male patients were 37 in number, and the females 38. Six or eight of the males work constantly in the garden. A clergyman preaches weekly on Thursday, and says prayers on Monday, to a select number of the Patients, who listen attentively. On Friday, a fiddler attends, and the Patients are allowed to dance—the males together and the females together. This is said to delight them very much, but has no permanent effect on them either to the better or the worse. The general state of health was good; and the Registers were accurately kept."

Spring 1833: "He found the Montrose Asylum, as usual, clean and well-aired; and the Patients well taken care of, and the Registers accurately kept. The males amounted to 36, and the females to 36. The general state of health was good, only two males being confined by indisposition. None were confined to their room by restraint, and only three males and two females under partial restraint. Several of the females knit stockings extensively, and sew; and such of them as can be trusted are occasionally taken to market or to walk in the Links. Some of the males are employed in the garden and other out-work."

Spring 1834: "On occasion of the visits both in Autumn 1833 and Spring 1834, it was found that the two Public Hospitals (Montrose and Dundee) were in excellent order, and that the Patients are taken care of and managed in the best possible manner, as particularly explained in last year's Report; and, further, that the Registers appointed by the Statute were regularly and accurately kept."

Autumn 1834, and Spring 1835: "On both occasions, the two Hospitals were in excellent order, and the Patients well taken care of, as explained in former Reports; and the Registers appointed by the Statute were regularly and accurately kept.

"Since my last Report, the Managers of the Montrose Hospital have appointed W. A. F. Browne, Esq. Surgeon, to be Superintendent, who explained to me, in Autumn 1834, various improvements which he contemplated for the better accommodation and greater comfort of the Patients. From the exertions of an individual so well and thoroughly acquainted with this important and delicate branch of the profession, and who is possessed of zeal and enthusiasm for

carrying his knowledge practically into effect, the Institution at Montrose cannot fail to derive benefits and rise high in public estimation."

Autumn 1835: "These Hospitals he found in the same excellent state as mentioned in prior Reports, and the Registers regularly and accurately kept.

"Under the directions of Mr. Browne, the Superintendent at Montrose, various important improvements have lately been made in the Hospital. In each of the four halls, water has lately been introduced, which serves the Patients both for drinking and washing. Gas has also been brought into the Hospital; and preparations are making for employing the Patients in various sorts of work. Only two were under constraint. Four cells have been constructed at some little distance from the main building for Patients who are under restraint, and requiring separation from the others. A lady's parlour, having a piano in it, has lately been made out to suit a better class of Patients; and another parlour of the same description is in a forward state.

"The practice of introducing a fiddler once a week is continued. The Sheriff happened to be visiting when the females were dancing. The music seemed to give pleasure to all, whether dancing or not, and, for a time at least, seemed to change the current of their ideas. The dancers conducted themselves with perfect propriety. One of them who is religiously insane, and, on ordinary occasions, very annoying to visitors, by declaiming to them very sternly on religious topics, was dancing merrily, with her Bible in her hand, and came up to the Sheriff, and made some observations as to turning their kirk into a ball-room, and laughed heartily.

"There have long existed ponds in the Links at a short distance from the Hospital, from the water in which noxious vapours arise. These are now to be drained by the Magistrates, and a contract has been entered into for that purpose."

Spring 1836: "The only persons under special restraint are two males: each of these has an apartment and airing-ground to himself, detached from the main building. The improvements are still in progress; and it is hoped further suitable accommodation may be provided for the better class of Patients. It would also be desirable that the public worship which takes place on a week day should be on a Sunday. Several of the Patients were weaving at

looms, several picking oakum, and several of the females were engaged at clothes-washing and other domestic works."

The Reports now quoted are all under the signature of James L'Amy, Esq., Sheriff-Depute of the County, and evidence conscientious attention to the trust reposed on him. But, most willingly acknowledging the fidelity and sound judgment of that gentleman, the writer, having ground for comparison, must be permitted to regret a deficiency—namely, the absence throughout of any statements by the Medical Persons whom he employed as Inspectors, and from whom—it may be said without offence—greater information, touching various matters of consequence, might have emanated than he thought requisite, or possibly felt himself enabled, to impart. The difference, in this respect, between the Reports from Forfarshire and Edinburgh is most essentially in favor of the latter, which, besides, are more numerous as relating generally to *three* annual visits, and, at the same time, abound in minute details on topics not exactly of a professional character. By way of illustrating these observations, and as *data* for a conviction that much good must have resulted from the operation of the Act, the reader is presented with several extracts (or condensed summaries) chosen from about a hundred Reports, sent in, with two or three exceptions, by Mr. Adam Duff, and comprehending statements by his Medical Associates, especially Dr. Thomas Spens (late President, and long, as now, Treasurer, of the College of Physicians), to whose assiduous labours, and unremitting but most unostentatious benevolence, the community at large, and the relations of insane persons in particular, owe a measure of gratitude, not the less enviable because never solicited by him.

Care is taken, in the course of what follows, to avoid unnecessary, and, as will be easily inferred, very discreditable, *personalities;*—the writer having no other object in view than is laudible, and ought to be aimed at, on the best *public* grounds.

1816. House, marked No. 1.—" On occasion of the first inspection, some address seemed to be used in delaying the Reporter's commencing his examination, as also in the order in which the rooms were shown, obviously with the view of putting such of the Patients or their apartments in order as might have been most subject to animadversion. The defects were, however, in many respects sufficiently

apparent. The apartments were in general too crowded. In one small room on the ground floor, which was besides far from clean, four females slept. In other three rooms there were three females who slept in each, where two would have been enough for the size. In several cases, two lay in one bed, which Medical persons must disapprove of. . . . There are here no public or day rooms, but the Patients eat in their bed-rooms, and remain there when not in the garden. . . . Upon the whole this House appeared to be crowded, and the rooms not sufficiently ventilated. A more complete separation of the sexes would be desirable, as well as some classification and proper association; but the house and premises do not admit of such changes, especially with the present number of inhabitants. . . . Some doubts having presented as to the propriety of continuing the confinement of ——, and one or two others, an order was given to a Medical Gentleman in ——, to visit and make a particular report as to the state of these individuals. The same order was given in every other case in the course of the inspection, where the least doubt could exist on the subject." —At the inspection in December of the same year, one Patient was in his cell, "being in an outhouse on a level with the ground, having a large window without a pane of glass in it; but an outer-shutter was nearly closed, so as to exclude in part the snow that was then drifting, and with it a considerable portion of light. In the apartment above this cell, there were two ladies in bed—no fire in the room, and several panes of the windows were broken: they complained much of cold, and stated that as the reason for their continuing in bed. The keeper promised that this should be immediately rectified."

House, No. 2.—"This was only opened last Whitsunday, and is well and pleasantly situated—every thing in very good order, and suited to the board, which is from £50 to £200 per annum. . . . In the interval (between two visits), great improvements had been made on the premises in various respects, and nothing could surpass the good order, cleanliness, and comfort, observable in this Asylum."

House, No 3.—"Of the above (11 patients), four were in chains—two males and two females. Of these was one who seemed perfectly quiet and good natured, but was chained because he had attempted to escape over a very insufficient

fence adjoining the house. The apartments were, in general, ill-aired and dirty. The Patients all complained of being too much confined, and also of being badly treated. There was obviously too much restraint and confinement, arising from deficiency of keepers and insufficiency of fences." —At a subsequent visit, the Reporter, having received information from a discharged Patient, went straight to a particular apartment—"On opening the door, the room appeared nearly dark, there being an outer shutter closed upon the window, which, though shattered and thereby insufficient to exclude the wind and the snow, in a great measure excluded the light. On causing this shutter to be opened, it appeared that five panes of glass were wanting, and that a quantity of snow had drifted into the room. In a bed without curtains placed betwixt the window and the door, within a foot of the former, lay the unfortunate Patient chained by the leg, coiled up under two plies of thin blankets. She had under her a single mattress, containing so little wool that the lower part was quite empty. Her feet were cold and œdematous, and there were chilblains on two of her toes. She could give very little information about herself, but in general complained of ill treatment, and must have suffered much from cold during the then rigorous season. It was indeed hardly possible to conceive a human being in a more wretched condition. . . . The Reporter strongly expressed his feelings on the subject; and having sent out a Sheriff-Officer on the following day, to see what state the Patient was then in, he found that the effect of his admonition was to free the Patient from the foresaid state of restraint, and that she was sitting comfortably by the fire, but with her hands shackled, which might possibly be necessary. . . . At the subsequent visit, the effect of the preceding was sufficiently observable. The use of chains was entirely laid aside, and the strait-waistcoat was the only species of coercion that appeared to be in use."

House, No. 4.—One Patient "in a miserable dirty, ill-aired room; the accommodation of another seemed not much better."

House, No. 5.— —— "was confined in a room, gloomy and ill-aired and dirty. ——, a young woman, fatuitous and pale, probably much confined to a very small room, not provided with any means of ventilation. When the door of this apartment was opened, she instantly and in

haste escaped from it, like a dog from a kennel. She appeared quiet afterwards and quite manageable." * At a subsequent visit, "the situation of these Patients seemed somewhat improved."

Houses, Nos. 6, 7, 8, 9.—Reported as ill-aired, gloomy, uncomfortable, &c. The state of a female in one of them "deplorable in all respects." No. 10.—"A room of sufficient size, but rather remote and gloomy." No. 11.—"The apartments are spacious, clean, and well-aired—grounds good—due attention paid to the classification of Patients according to the state of the disorder; and every thing seems attended to, consistent with the construction of the buildings—not erected for the purpose—that can contribute to the comfort of the Patients, or tend towards their recovery." No. 12.—"There seems no separation of males and females; and the house in general is far from clean, or suited for the purpose to which it is applied." No. 13.—"Room good—patient in low spirits—might be the better of more society." No. 14.—"No walled garden—the Patients are consequently subject to much confinement. —— has for a number of years never been let out of a miserable, dirty, ill-aired, cold, damp, and altogether very bad apartment; with only one small window to the north, much broken, and holes stuffed with dirty straw, and covered with paper. The keeper is an old woman, very deaf, and seemingly ill-fitted for such a charge."

No. 15.—"Clean and pleasant." No. 16.—"——, a Pauper, found lying in a wretched apartment, with a broken window, and very bad bedding. It turned out that she had been constantly in this situation for the space of three months past, solely in consequence of having no clothes to put on. The only article she possessed was one shift, then upon her." No. 17.—"Rooms ill-aired and dirty to a degree. Patients in a similar state as to filth. On the inspection in March, these Patients were found in a still more horrible situation in point of filth than at the former visit." No. 18.—"On the whole comfortable." No. 19.—"A single Patient 'confined in a small dirty room, with an offensive dunghill close by the window.'" No.

* This Patient, at the distance of a few years, was removed to the Montrose Asylum, where she now remains—hopelessly imbecile indeed, but perfectly inoffensive, in every respect comfortable, and, among other advantages, provided with a wheeled-chair in which, being lame, she is drawn to a pleasant airing ground when weather permits. The contrast between a kennel and her present abode is striking enough.

20.—"Good garden, but house itself old and slovenly to a degree. On enquiring at her (a Patient) if she had dined, it being then past four o'clock, she said she had not: on asking the cause, the attendant said it was not yet the general dinner hour: on afterwards enquiring, however, at the other Patients, it was found that the hour of dinner was long past; and the only answer that could be got, as to why this unfortunate girl had been neglected, was the general one that 'they were sure nobody was starved in that house.'" At next visit, "the premises were in the same filthy state. The inspection was made about the same hour, and, on enquiring as to dinner, though the regular hour was said to be three o'clock, yet none of the Patients had then dined, nor even any preparations making for that purpose. This shows the irregularity and want of attention to the comfort of these unhappy beings." Nos. 21 and 22.—Both well cared for. In No. 23, a lady (the only Patient) "was found in a very uncomfortable apartment, and the light entirely excluded from it." In No. 24—another lady found in bed, "where it was said she had been, apparently without any good reason, for upwards of three weeks. She complained of solitude; and her apartment was by no means clean or well-aired." No. 25.—"The situation of these (two) Patients sufficiently comfortable."

This closes the list of Private Houses, and, surveying the descriptions given of them, every reader will perceive both the correctness and the lenity of some general observations with which Sir William Rae, then Sheriff of Edinburgh, followed up his narrative:—"1. That no pains are taken towards affording employment to the Patients—a matter viewed of the last importance towards the comfort and recovery of insane persons. As to the males, it so happened that the Reporter in no one instance found any of them occupied, and in very few instances did the females appear furnished even with means of employment by sewing. 2. That the Keepers receive too many Patients, considering the nature of the accommodation they possess, and the number of the Under-Keepers whom they employ. This leads to the confinement suffered by some, and the unnecessary restraint to which others are subjected. 3. That no attempt at classification is made. Where numbers are put into the same room, this is done without discrimination or regard to the circumstances of the Patients, or the de-

gree of disorder under which they respectively labour. By far the greater part of these unhappy persons are, however, confined to their own apartments, into which they are constantly locked, and where, without exercise, employment, or society, they waste the most wretched existence that can well be imagined. 4. There is a total want of Medical attendance either for mind or body. The Keepers seemed to ridicule the idea that Medical aid can be beneficial in a mental disorder, and never think of employing it. Indeed, in most cases, the circumstances of the parties do not admit of their defraying this most necessary expense."

Besides examining the private Madhouses now enumerated, the Sheriff conceived it to be his duty to visit the Public Asylums of the County—being three in number, and of these he reported in part to the following effect:

1. The cells connected with St. Cuthbert's (the West Kirk Parish) Poor House. These are 19 in number—8 on the ground floor and 11 up stairs—each 8 feet long, by 5 wide, and 7½ high. "There is a window to those below, 32 inches broad by 16 high, iron-stanchioned, with a wooden shutter hinged at top, not glazed. There are three or four oblong narrow holes in the shutters, to admit some air and light when the shutters are down. The upper cells are on each side of a narrow passage; and the only admission of external air within is by a hole in the wall, occasionally stopped by a cloth: Though most of these holes were open, and not half the Patients within, the air was most unpleasant and close: When all are confined and the holes stopped, it must be bad indeed. A small pane of glass in the roof gives light to the upper cells. In so far as depended on the Keepers, every thing appeared clean and well ordered; and there was no restraint applied, except the confinement of some of the Patients to their cells. The airing ground is only about 36 feet square; and the accommodation, on the whole, very inadequate either for the recovery or comfort of those confined." At two visits, the numbers of Patients were respectively 2 males and 16 females—4 males and 16 females.

2. Bedlam—attached to, or connected with, the City's Charity Work-House. Numbers of Patients at two visits, 17 males and 30 females—13 males and 37 females—in general belonging to the lowest rank of society, and having the disease "to a horrible degree. There can, however,

be no doubt that every attention is paid to them personally; but the accommodation appears defective in the extreme. Some apartments have indeed been lately added, occupied by females, and are roomy and well-ventilated; but the old cells are cheerless, ill-aired, and dismal to a degree. Twenty, on the ground floor, are damp, and where the Patients in winter must suffer severely from cold. Part of these, attached to the old City Wall, have no fire-places or means of heating them, nor any building above or below them. They are lighted and aired solely by openings in the doors by which they are entered, and which doors open into the court-yard in which the Patients walk. The noise and cries which issue from these cells must thus be dreadfully distressing to the other Patients. When the Reporter was present, one woman, in a state of high delirium, continued to stretch her arms out of the foresaid opening in the door, and to utter such horrific cries as to render it almost impossible to remain in the court-yard for any length of time. When such is the nature of the accommodation, it is in vain to expect that the attention of Keepers or the care of Medical Persons, however unremitting, can tend much to the comfort, and still less towards the recovery of the unfortunate Patients, here confined."

3. Lunatic Asylum, Morningside. At the two inspections—13 males and 9 females—14 males and 5 females. "Every thing seems here done that assiduous attention on the part of the Directors, Medical Attendants, and Keepers, can ensure. But the accommodation is at present so defective as in a considerable measure to defeat the object which those exertions are calculated to attain." At this period, only a small portion of the intended edifice had been finished—admitting classification only to a small extent among the females, some of whom were at work; but with respect to the males, says the Reporter, "no classification is practicable,—there being only one apartment suited for a day-room in the building destined to them"—an arrangement "extremely faulty, though at present unavoidable."

The details, thus abridged, are followed by general observations, partly with a view to remedy, only a few of which can have place here. "With respect to the higher orders of society, or those individuals who can afford to pay liberally for their board, sufficient attention is paid both to the comfort of the Patients and to the due

means of accomplishing their recovery. But a great description of those unfortunate persons belong to the lower classes, or are in such circumstances as to be unable to pay the board required in the higher houses. The amount they can afford is far too low to secure any thing like comfort, &c. In several instances, the board did not exceed £16, and in many it was not above £20. For such a board, it is obvious that few families would be disposed to lodge and entertain a person of sane mind. What treatment then may be expected for a poor Lunatic, whose relations can afford no higher sum? * The foregoing Report cannot, from its nature, present the real features of the confinement attending persons of this description. To judge of it, would require an eye to witness, and an ear to listen, to their sad complaints. Even now, the Reporter can noway describe the impression which remains upon his mind from the view of those sufferings which his official duty required him to take.

"In general, the Keepers of such houses are not possessed either of the knowledge or the feeling requisite to such a charge. The idea that any thing ought to be done, calculated to bring about recovery, hardly ever seems to enter into their minds; neither is it obvious that they consider the attending to comforts as a matter of much importance. The whole attention of the Keepers is directed to the safety of the persons of those under their care; and if, by inducing them to be almost constantly in bed, or if, by means of bolts or bars, with the aid occasionally of chains, and in some cases of total darkness, they can keep their lodgers in safety without injury to themselves or to the apartments occupied by them, the whole object in view seems considered as attained." (Then, having passed a just eulogium on the York Retreat, which he had lately visited, he proceeds):

"The object of these observations is to point out the necessity of there being certain Public Establishments, under the control of individuals holding ostensible situations, and under the management of persons of acknowledged Medical skill, and where the most approved system for the cure of such Patients may be observed. It is obvious that the insane must be kept either in Public

* It is particularly noticed, in regard to Paupers not belonging to the parishes of Edinburgh and the West Kirk, that "a bargain is made with the Keeper of a private Madhouse for the custody of them on the cheapest terms that can be afforded."

Asylums or in Private Madhouses. Some objections may be made to both, but those to the latter are by far the most formidable—arising from the general bad construction of the premises, the want of Medical attendance, and the ignorance of Keepers." (The remainder of the Report is taken up with discussion and inquiries respecting the establishment of County Asylums, the appointment of Inspectors, &c., as contemplated in the Bill then about to be laid before Parliament by Lord Binning, and with suggestions as to the propriety of making provision for criminal Lunatics, as well as those pitiable sufferers who wander about uncared for by any one.*)

* Will the Writer of this Memoir be pardoned for saying that, several years ago, he endeavoured to rouse the public mind into due sympathy for this last class, but that hitherto his call has met with nothing like adequate response? He cannot avoid either perceiving the truth or lamenting the unproductiveness of the following reflections:—"What but the most culpable indifference can account for those appalling and truly heart-rending spectacles so often witnessed in almost every village, and, still more marvellously, in the streets of our largest cities? Is it as a foil, one might ask, or in compliment to the usually enjoyed proportion of intellect, that the poor idiot is permitted, if not encouraged, by the carelessness of his nominal keepers and the dole of sickening humanity, in his objectless and staring perambulations among us? If this be the motive, why is so important a personage, as he must necessarily be esteemed, allowed to become the recipient of every abuse and cruelty which wantonness or fiend-like perversity thinks proper to heap upon him? Is he not entitled, if his visitations be either profitable or tolerable, to at least the humane treatment which our laws award to the brute creation? May not even his exterior resemblance to our species be somewhat enhanced by his being furnished with a decent garb to cover his nakedness, and protect him from the inclemencies of the weather, or the harsher inclemencies of an insulting and a prostituted superiority? Finally, is there not a possibility, if he must go at large, of guarding him against brutality and outrage with as much care as is manifested in the preservation of property? In whatever manner these questions, or any similar, may be disposed of, it is certain the evil is a reproach and nuisance to society, and the proper remedy for it demands more profound examination, more ample command of means, and more extensive co-operation, than may at first sight be imagined necessary. Nothing could be easier, it is true, than the alleviation, if not the entire removal, of its most obnoxious symptoms. The fiat of authority might compel, under severe penalties to be inflicted on near relatives, or, failing them, the official guardians of our municipal comforts, as in another case of deplorable misfortune (that of the insane), the entire disappearance and confinement of those helpless creatures whose history has hitherto belied the splendid dream of human perfectibility. But, admitting the efficacy and the expediency of legislative interference, is it fitting for an age of improvement and benevolence to allow the success of such interference to be the ultimatum of what is desirable and practicable on the subject? Would it be—ought it to be—enough for us that these unfortunates were removed from our sight? No! It is with some anxiety, and a commendable regard to decency and to feeling, that we dispose of the dead bodies of our fellow-men. Shall we be less concerned about the disposal of those living beings whose weakness ought to call forth our compassion in the very proportion that it renders them burdensome to society? That there prevails a great degree of negligence as to their condition and comfort, will appear very obvious, when we compare the little attention which has as yet been shewn them collectively with the extensive plans almost generally devised in this country in favour of every other class of unfortunates. Let us confine ourselves to a single city. In Edinburgh, then, we have a Magdalen Asylum, a Lunatic Asylum, a Blind Asylum, an Institution for the Deaf and

The extracts, next to be given, from a Report in August 1819, refer to a few of the same establishments in the order of their numbers.

1.—"It is probable that some of them (24 boarders) might be easily managed out of confinement, if they had friends willing and able to take charge of them. In April 1817, —— had four female servants; but now, though she has more boarders, she seems to have only two, and these young girls—a number and description very inadequate for such an establishment, though —— and some of her daughters may be very active. Reckoning her board and other charges somewhat above £40, her receipts at present will be at the rate of above £1000 per annum; and I am inclined to think that, if justice were done to her boarders, their accommodation, bedding, and service, would be better: At all events, her present number seems too great." No. 3. Some of the rooms very ill-ventilated. Average board, £30.

No. 12. (14 boarders.)—"Since last inspection, —— has gone out, and ——, son of —— at Montrose, has been admitted. He was in bed, chained by a leg; the room was ill-ventilated and the window too small. ——'s room continued in a most offensive state. Though extremely difficult, if not impossible, to keep the room of such a person free from nuisance, it would be by no means so bad in such an establishment as the Lunatic Asylum. The Sheriff bade —— get the windows of —— and —— rooms enlarged." Boards from £12 to £40—about £30 being paid for the greater number.*

Dumb, a House of Industry, and a great variety of establishments for benevolent purposes. But, what is done—what has ever been attempted to be done—in it in behalf of that by no means small class of helpless creatures whom the hand of Nature appears to have cast around us, as if to humble our pride and to demonstrate our dependence, for much of what we deem our excellence, on the laws of the material world? The poor-houses, it is true, usually contain some of these unfortunate beings; but many of them are allowed to wander at large, and those, again, who are lodged there are, with few exceptions, precluded, by the very circumstances of the establishments, and by the influence of a very general opinion as to their total incapacity for education, from all chance or possibility of being ever useful to society. We are not certain, indeed, that there is a single institution in Great Britain exclusively, professedly, and systematically appropriated to this class of defectives." (*Essay on Education* in the *Encyclopædia Edinensis*,—afterwards published separately by Waugh & Innes, Edinburgh, 1825.) Those indescribable monsters, Burke and Hare, would have been denied at least one victim, if society had duly regarded the appeal.

* There is farther notice of one of the above Patients in the Report for April 1820, namely:—"——'s niece told us that he had given warning to ——'s friends to remove him, because he was very unmanageable, anxious to escape, and could easily get over the wall. He belongs to Montrose, and I have no doubt that he would be much better in the Asylum of that place."

St. Cuthbert's.—"The cells continue in the same state as when I first visited them with Sir William Rae—only on this occasion the ventilation was better. There was a young man, ——, whose noise must be distressing to the others, especially in so confined a place."

Charity Workhouse (53 Patients.)—"In general, the accommodation and airing grounds here for females are better than those for the men, of whom there are at present more than usual. The upper half of most of the windows of the lower cells are glazed, and the under half is fitted with a moveable board, which, when drawn up, admits air and light; and, when down, the air is excluded, but light is admitted by the glass. Stoves have been constructed for heating the houses in cold weather." The board paid

Again, in September following, "Mr.— — expects that —— will soon be removed;" and his actual removal to the Dundee Asylum is recorded in the Report for February 1821.

These may be deemed very unimportant statements by some readers, but, in the opinion of the judicious, will appear to demonstrate the value, because the minuteness and particularity, of the Reports. Nor is this all that can be said in commendation of those who were concerned in them. By a singular coincidence of circumstances, there now lies before the Writer, franked by Sir Wm. Rae, a letter, addressed to a friend in Montrose, regarding this identical Patient. Coming from Mr. Duff, whose conduct in the matter, as throughout these visitations, cannot be too highly estimated, it is as follows:—

"Edinburgh, 14th September, 1820.

"Dear Sir,—I hope you will excuse my troubling you about a young man, ——, son of ——, at Montrose, and at present confined in a Madhouse kept by a Mr. ——, at ——, in the parish of ——, and this county. Mr. ——, his niece, and the people of the house, are very humane and attentive to their boarders; but they have not proper accommodation for one like ——, who is very unmanageable, and anxious to make his escape. The garden is small, and —— could easily get over the wall. The people of the house sometimes pay a man to walk about with ——, when he is allowed to go out to the fields; but they complain of this expense. —— therefore is in general confined in a small uncomfortable cell, and is sometimes chained by the leg to the bed, to prevent his escape. The room is not well ventilated, although, in consequence of directions which I gave at my inspection of this house in August 1819, the window of ——'s room is enlarged. From ——'s being so unmanageable and anxious to escape, I think he ought to be kept in a public Asylum, instead of a private Madhouse. A public Asylum in general has good airing grounds, surrounded with high walls, and a sufficient number of men-keepers to look after the Patients, and prevent their escape. Those advantages, of secure airing grounds and plenty of keepers, are not to be obtained in a private Madhouse unless when a high board of £60, £80, or £100 is paid. Mr. —— is so satisfied that —— ought not to be in his house, that he has given warning to his friends to remove him, but this warning or hint has not as yet been taken. It would be a real act of charity if you would persuade ——'s father to remove him from Mr. ——'s. I am sure the young lad would be well taken care of in the Montrose Asylum; but if, perhaps, his relations do not wish him kept so near them, he might be sent either to the Aberdeen or Dundee Asylum, whose board may be moderate. The board in the Edinburgh Public Asylum is £52 a-year, and this Asylum is in general full, and accordingly the Directors have now begun to build the middle part of the house, which want of funds has hitherto prevented them building.—I ever am, dear Sir, yours truly,

(Signed) "Ad. Duff."

It is most confidently believed that no right feelings, in any quarter, can or will be wounded by this really just memorial.

for 29 would, at the rate of expenditure, "fully cover the expense of all the Patients."

Lunatic Asylum.—"It is much to be desired that the funds of this Institution will soon enable the Managers to carry on the plan, and make some additional buildings; for at present the separate rooms are inconvenient, and there is in particular great want of a public room for the gentlemen." Average board, £59 or £60—the number of Patients being 22. Writing at the distance of twelve months afterwards, the Reporter says of the same establishment:—"There have been many applications for admission here, which have been obliged to be refused for want of room; but that deficiency is now in the way of being removed, as the central and principal part of the east front is building, which will afford forty additional sleeping-rooms and six day-rooms for Patients, &c.—so that there will be room for about sixty Patients in all; and I think it probable that it will be filled, even at our present rate of one guinea per week. And, if the Managers were to extend its benefits to those of a higher rank not in affluent circumstances, and receive a certain number of such at a lower board —say £10 per quarter (which would not be a losing concern to the Institution)—I have hardly a doubt of sixty Patients —at least it would be wisdom in the friends of many of the persons in private houses to remove them to the Asylum; and there have been always of late nearly thirty persons at £40 a-year in the private establishments of this county."*

* These very prudent hints were repeated, and, at the same time, met with a commentary in the Report of October 1823. Thus, keeping in view, as worthy of marked attention, that the amount of accommodation at the time, or about to be afforded, was for 60 Patients, and that the average of existing board was £60—no Paupers, at the rate of 7s. per week, having been admitted, *according to the positive promise and intention of the Managers at an earlier period*, —we find the following paragraph: "There has not as yet been in it (the Asylum), at any one time, more than 28 Patients, though there is accommodation for above double that number. This appears to me to be owing partly to the advantages of the Institution not being sufficiently known—partly to dislike to a public establishment—and partly to the expense being beyond the means of many whose friends would otherwise wish to avail themselves of it, —the lowest rate being a guinea per week. The last impediment might probably be in a great measure obviated, if a certain proportion were to be received at 15s. per week, or £10 per quarter, which, I think, might be done without loss to the Institution."

A word as to this threefold explanation: How came the Managers to withhold Reports from which the whole world might have learned the nature and extent of the benefits conferred? Has dislike to a public establishment been *specially* experienced, or so much as suspected elsewhere—at Montrose for example? Did the Managers, in the course of ten years afterwards, make an attempt to obviate the last and great impediment? However these questions may be answered, it is certain that, up to the year 1834, there never were more than 43 Patients in the Lunatic Asylum of Edinburgh at any one time.

February 1821. No. 1.—"Though I cannot just say that this house is dirty, yet I have always observed a great contrast between ——'s room and the rest of it; and in general it has not that appearance of neatness and attention which it might, and I think ought to, have; and a great part of the bedding appears very indifferent." No. 3.—"Miss —— was manacled, seated on a timber chair, and chained by one leg to the floor. With more care, attendance, and kindness, than she seems to have or can have here, some of her distress might be alleviated; and I said what I could to —— with this view." No. 7.—"Very few of these private houses possess accommodation, attendance, and control, for a person in ——'s situation."

Passing over several years, during which the effects of admonition and reproof were being realized in these establishments, while others, successively opened, almost certainly produced changes for the better on the principle of competition—to say nothing of higher influence—we may advert with no small satisfaction, not however wholly unmingled, to Reports of a later date. Thus, of date November 1829, it is said regarding St. Cuthbert's:—"This establishment is entitled to much commendation. Great pains have been taken to improve it; and we found all the rooms and beds as clean as possible, a sufficiency of bed clothes, and all the people comfortable in point of warmth. Besides warm and cold baths, there are two shower baths, and places for washing, all very neatly fitted up; and since we were last here, a second stove for heated air has been added." 40 Patients.—Charity Workhouse:—"Though the day was frosty, every part was comfortable by means of heated air, but at the same time well ventilated; all the rooms and bedding as clean as possible, with a sufficiency of bed clothes for the season: Very good broth and bread were serving out for the dinner. Along with the warm bath, there is the *douche*, which has frequently a powerful effect in allaying high excitement." 67 Patients.—Lunatic Asylum: "We found here 16 male and 19 female Patients, and, as in all establishments of a similar nature of some standing, a very small proportion of curable—not above five or six. As all pay a considerable board, the income of the Asylum has a good deal exceeded its expense, and, together with legacies, there being now a pretty large fund, I believe the Managers have in contemplation

to enlarge the establishment by adding a building for Paupers, and procuring some more ground."

February 1835.—"—— has 7 males and 9 females, all Paupers. I reckon that at present he will be in receipt of £260 per annum, or £22 per month, *minus* the licence duty, for the lodging and maintenance of sixteen boarders, himself and servants—in all, twenty; and it appears to me certain that, if there were a public establishment, the situation of these Paupers would be greatly improved, far beyond what is possible for —— to accomplish; and I would extend this remark to all such Paupers in this county, whether in private houses or in the two public establishments, much as these last have of late years been improved." Thirteen of those here are Paupers, and five of the men wear fetters, on account of the incomplete fencing of the garden." "I again mentioned to —— the dulness and bad state of her rooms and furniture."

April, same year: "In reference to what I said with respect to Paupers, in my last Report, I add that I believe many of them are as well fed and lodged—some, perhaps, better—in these houses than they were at home; but the great advantage of a well-regulated Public Establishment, with a sufficient extent of airing ground, would be the superior means for air and exercise, for amusement and employment, and for moral treatment in general,—thus affording the unfortunate people a much better chance of recovery."

Lunatic Asylum.—"—— has just been taken back to ——, a change evidently not for his advantage. He was here at £25 per annum. There are six or seven here at present at as low a board."*

The Report for 1836, probably influenced by discussions then prevalent in certain circles, abounds in statements of a particular kind; but the interest of which, though of course greatest *locally*, is by no means confined to Edinburgh or its neighbourhood. Witness the following de-

* This is the first intimation of the kind, or, in truth, of any deduction from the long-established, but frequently *exceeded*, rate of board,—namely, one guinea per week. Curiously enough too, as the Writer must think, it was made *after the commencement of his own enquiries and arguments, with which the worthy Reporter, being a Member of Committee, as well as Physician to the Asylum itself, was perfectly familiar.* No reader can be at a loss to perceive that the immediately preceding remarks were intended to bear out the plan for the accommodation of Paupers then contemplated, while another observation, presently forthcoming, will certainly be interpreted as a sort of apology for the Managers of that Institution.

tails: The private house formerly numbered as 11, and now containing 18 Patients, 5 of whom being ladies: "The rate of board here is £100 per annum; but there are at present several at a somewhat higher, and several at a lower rate." "—— has 1 male at £40, 1 female at £35, and 4 female Paupers—3 of them at £20, and 1 at £12 per annum." "—— has 2 males and 3 females, all at £50 per annum, except ——, for whom only £40 is paid." "—— is now the only boarder at £150." At ——'s, not previously mentioned in these extracts, 14 males and 11 females; one of the former at £250 per annum; "the rest at from £24 to £70; but the most usual rate, £50." —— 1 male and 5 females, at from £20 to £38. —— 8 males and 9 females; 1 at £6 per quarter; "all the rest here are parish paupers—12 of them from Leith at £16 per annum, 1 from Edinburgh, 1 from Portobello, and 1 from Dunse at £20 per annum." —— 8 males and 8 females—£25 paid for 1, and from £16 to £20 per annum for all the rest; 11 of them are parish Paupers. As the garden here is not sufficiently fenced, almost all those who go out to it have fetters, certainly a great evil and grievance, but preferable to constant confinement in the house."

No. 3 of old list.—14 males, 16 females—30, "of whom 22 are parish Paupers, at from £18 to £20 per annum, but only 6 of them are of the county of Mid-Lothian. With regard to the board of the other 8, £42 is paid for one gentleman, and from £20 to £32 for the remaining 7."*

"Mrs. —— has 25 males and 21 females—46. There are here 30 Parish Paupers—viz. 18 males and 12 females —at from £18 to £20 per annum; 10 or 12 of them do not belong to Mid-Lothian. The board of the others varies from £20 to £30 per annum. The numbers in this house have increased very much of late years, so as now to exceed considerably those of any other private house in the county—a proof that the public are sensible of the merits of Mrs. ——'s establishment." "—— has 4 boarders— 1 male and 3 females. —— at £48, —— at £40, —— at £25, and —— at £45 per annum."

No. 2 of old list.—12 males and 3 females—15. ——'s board has been reduced to £100, but Mr. —— says he occasions so much trouble and anxiety that he will not

* A Patient, long resident in the Montrose Asylum, was removed from it to this house in December last, avowedly for the sake of a very few pounds difference in board.

keep him for less than £150. —— at £200, —— at £130, —— at £105, —— at £100, —— and —— each £80, the 3 ladies each £60, —— and —— each £50, —— £40, —— £30, and —— £20 per annum." No. 1. of old list. —6 males and 18 females—24. £20 paid for one lady, £26 for another, and for all the rest from £30 to £60 per annum."

St. Cuthbert's Cells.—14 males and 25 females—39—"all of the parish," and, consequently, not paying board.

Edinburgh Charity Workhouse.—33 males and 42 females—75—"of whom 57, viz. 24 males and 33 females, are of the City of Edinburgh (not chargeable), and 3 males and 5 females—8—of the County of Edinburgh; while 6 males and 4 females—10—belong to other counties. So large a proportion of these inmates pay a board of £5 per quarter as nearly covers the expense of this part of the establishment of the Edinburgh Charity Workhouse."

Lunatic Asylum, Morningside—26 males and 20 females —46. The common rate of board is one guinea per week, at which there are at present only 14, and 5 at higher rates, and 27 at from £45 to £21 per annum. It is evident that the benefit conferred, or relief thus given, is as great, and in my opinion greater, than if an equal number of Paupers had been received at the rate of board usually paid for them."*

* Admitting the truth of this observation, one may reasonably express surprise that the Managers were so long of discovering and exemplifying it; but surprise must greatly increase when the early pledges, on which it is certain the public relied, are brought into view. Only a tithe of them can be adduced here, and it is possibly enough. In the *Caledonian Mercury* of 5th March, 1812, appeared a representation, subscribed by no less than eight Honourable and Reverend Gentlemen, in name of "The Honourable and Reverend the Managers of the Edinburgh Lunatic Asylum," and consequently worthy of the highest respect and confidence from all who looked solicitously to the progress of that Institution. It announced various particulars assuredly of great and general importance. "The Managers have been led to conceive that the parishes within the Presbytery of Edinburgh, and within the Presbyteries least remote from the city, will have the most favourable opportunity of availing themselves of this Institution, and that they will, of consequence, it is probable, most frequently enjoy its benefits. They, therefore, lately resolved to make application to all the different Presbyteries which are in the situation above alluded to, and to request that they would humanely appoint a collection, &c. For the information of the public on the occasion, the Managers beg leave to lay before them the following facts:—That the Edinburgh Lunatic Asylum is intended for the reception of Lunatics from both the higher and lower classes of society. That appropriate accommodation is to be provided for Patients of both these descriptions. That to poor Patients, the most skilful attendance and advice will be given *gratis;* and, as there is no intention to draw profit from their board, the charge for it will be made so low as to render it advantageous, in point of economy, for their relations or parishes to procure their admission. That Patients may be received from every part of Scotland, but that a preference of admission will be given to those belonging to parishes

February 1837. St. Cuthbert's.—13 males, 23 females —36. "The day-rooms here have been much deterio-

which transmit parochial contributions. That the rate of board for poor Patients can be made comparatively cheap, because the rate to be paid by the richer Patients will enable the Managers (as experience has proved in similar institutions) to defray the general expense of management, and of various domestic articles, without charging any proportion of allowance for them against the poorer. That, by the same means, the common current expenditure will be supported in all time coming; and the only gratuitous aid which the Managers will have to solicit from the public will be for defraying simply the cost of the original erection of the Asylum. That, when the building now begun is completed to the full extent of the plan proposed, it will furnish accommodation for from 200 to 300 Patients; but it is so arranged that detached parts of it can be conveniently carried forward, and will accordingly be finished as fast as the requisite funds may from time to time be obtained. Such are the relative facts which the Managers have thought it right and respectful for them to state. Having stated them, the whole case is left to the judgment and benevolence of the public, with the strong hope that they will give it a favorable consideration, and will encourage the proposed Collection by a liberal contribution."

The *Mercury*, of 19th March following, having advertised the list, said:—"It gives us much satisfaction to observe that a very handsome collection has been made at the doors of different places of worship, in the city and neighbourhood of Edinburgh, for building the Lunatic Asylum. We sincerely hope that this example will be followed by many other congregations, and that many other towns will imitate Perth," (which contributed £105 from its city funds, besides private donations.) On the 1st November of the same year, the sums which had been paid to the Treasurer amounted to £7447 3s. 1d.

Having enumerated these and various other facts, as the basis of his arguments, in a kind of memorial to the Managers, was not the writer fully warranted in coming to the following conclusion?—"The funds presumed to exist (about £10,000 in 1835) must be viewed as the product, in greater or less degree, of the money obtained from Parliament (£2000) and public subscriptions, on certain conditions expressed or understood. There is, consequently, a claim in justice on the Managers, who may be required either to complete the design for which such money was granted, or to restore it to those who can show right and may be disposed still to concur in fulfilling the purpose for which it was contributed. Moreover, until it be satisfactorily accounted for, there is little probability of due support being given to any other enterprise of the kind, however confidently and sincerely announced as a remedy for existing evils. Most obviously, the failure which has occurred might be appealed to as an argument against confidence in any new projectors, who could not possibly surpass their predecessors in strength or honesty of assurances; and, certainly, the characters of the Managers will be put in jeopardy by a resolute denial either of their obligations or of corresponding liberality. On the contrary, generous behaviour and hearty encouragement would redound much to their honor; while, by the force of example, as well as by direct support, they might be mainly instrumental in conferring an immense boon on society. The first difficulty, in the way of such an undertaking as is now contemplated, they must be perfectly aware, is the greatest—namely, the erection of an Asylum; but, this overcome, good management would almost infallibly secure future prosperity of funds, as their own experience, to go no farther, seems to demonstrate—confirmed as it is in the cases of many institutions, where the rates of board are comparatively lower. In my humble judgment, the welfare of the community would be most effectively promoted by a separate establishment (for Paupers), of dimensions sufficient for the demands of the city and numerous parishes in the south-eastern portion of Scotland, under a representative government, or Managers appointed, like those of the Charity Workhouse—namely, by all the bodies having interest, and, of course, as nearly as possible in accordance with modern science throughout. By this alone can the character of Edinburgh be redeemed and maintained. The labours of the Committee of the College of Physicians are directed to this, be their success what it may; and the hopes entertained by them, as every one will easily perceive, would be vastly invi-

rated by some late alterations, and the heated air apparatus does not seem to be very effectual." Charity Workhouse.—30 males, 47 females—77. "There is now accommodation for 33 males, and, at least, 50 females—83, in place of 70, as before the recent alteration (removal in part of the old city wall, &c.); and the women's part is much better, the rooms being larger, and in general more cheerful. I was glad to learn that the inmates kept their health very well." Lunatic Asylum.—25 males, 21 females—46. "Antipathy to public establishments is one cause of the Patients not having been somewhat more numerous here. Of course, the income has been much diminished by the large proportion of them at a lower rate of board. The Managers are about to erect additional buildings here for Paupers."

April, same year: "The uniform increase of numbers since I have been Inspector is an important fact, not, I flatter myself, altogether owing to the greater frequency of the disease, but partly also to other causes, not easy to be assigned. I commenced these inspections in 1815, and the average numbers to 1819 were 214; in 1823, 235; 1824, 251; 1825, 277; 1826, 293; 1830, 302; 1835, 344; 1836, 361; and this year, 379."*

gorated by friendly co-operation at Morningside." It will be presently seen that such plain dealing was neither resented nor overlooked, though the object aimed at is still a desideratum.

*The following Table (part of a much larger) shows the gross numbers of Patients from 1819 to 1837 inclusive, and the proportions in which they were accommodated by the different establishments alluded to. It is deduced from the official Reports thus far under consideration, but, besides omitting the specification of sex, is limited to *one*, out of *three*, of the statements made yearly.

Years.	In Private Houses.	Edinburgh Charity Workhouse.	Lunatic Asylum.	St. Cuthbert's Cells.	Total.
1819	129	53	22	18	222
1820	123	64	24	14	225
1821	128	62	24	19	233
1822	131	62	26	20	239
1823	124	63	25	26	238
1824	139	67	24	28	258
1825	156	70	29	36	291
1826	153	69	36	39	297
1827	143	68	31	36	278
1828	152	64	31	42	289
1829	152	67	35	40	294
1830	166	68	35	43	312
1831	175	69	38	49	331
1832	180	68	43	38	329
1833	187	67	39	36	329
1834	185	67	41	30	323
1835	189	72	46	35	342
1836	210	70	40	37	357
1837	221	77	46	36	380

—It appears from this list that Morningside Establishment stood throughout very low in affording accommodation to the insane—in fact, at times scarcely

The Reports by the Sheriff of Aberdeenshire (Alex. Moir, Esq.), referred to as being—with those already dis-

above St. Cuthbert's Cells, and invariably beneath the Charity Workhouse; while, in relation to those in private houses, and *a fortiori* the total number, its ratio of inmates was quite trivial. The Abstract of Returns from the Clergy of Scotland, relative to Lunatics in that part of the United Kingdom, ordered by the House of Commons to be printed 6th May 1818, stated:

		Confined in Public Asylums.	In Private Asylums.	With Friends.
Total Number of Insane Persons in Edinburghshire.....	285	56	92	32

It would be equally unjust and ungenerous towards the Managers of the Lunatic Asylum to withhold either their own explanation of a policy which, whatever were its essential virtues, subjected them to much public obloquy, or the praise due to disinterested and benevolent, though, demonstrably, very injudicious, conduct. At all events, the preceding Notanda regarding, be it observed, *a great national project*, would be incomplete without a brief, but, unhappily, still far from satisfactory, addition. It is supplied by documents printed under the authority of the Managers themselves. "A letter, addressed to the Managers, from the Treasurer of the Charity Workhouse, making an application for aid to improve the Bedlam attached to that Institution (intended, be it remarked, to have been superseded by the Establishment at Morningside), was remitted to a special committee to consider and report; but, before they had an opportunity of doing so, the subject was brought before the Managers more prominently by a communication from Dr. Poole, Convener of a Committee of the College of Physicians, appointed, &c. (as before). This communication was read at the annual general meeting, held of this date (July 26, 1835), when a committee was immediately appointed to meet with the Committee of the College of Physicians on the subject of it." (The nature of the interview and deliberation which followed may be inferred from the next paragraph.) "On the 14th December (same year), a special meeting of the Managers was held to consider another communication from Dr. Poole, containing a statement relative to the views and intentions of the original promoters of the Institution at Morningside (drawn up at the request of two of the Managers who had met with the Committee of the College). In laying this statement on the table, Sir Henry Jardine, to whom it had been transmitted by Dr. Poole, made several observations respecting it, which, having been adopted by the Managers as expressing also their sentiments on the subject, may be here quoted. Sir Henry, referring to Dr. Poole's statement, said, 'he thought it necessary, in justice, to remark that great misconception seemed to prevail in various quarters with regard to the views and sentiments of the present Managers of the Asylum as to the original object of the Institution. (Sir H. did not reckon the College's Committee as one of these quarters.) That no doubt can certainly be entertained that it was originally intended to be a charitable institution, in so far as the benefits of it could be extended to persons of the poorest classes afflicted with this distressing malady; but, in order to attain this desirable object, it formed an essential part of the plan of the Institution to take into it those of a higher and more affluent class, who, by paying a considerable board, might, in time, form a fund for the reception of the poorer classes, for it was from this source alone that the object could be attained. (Sir H. might have recollected another—namely, contributions from parishes, in the faith of deriving advantages.) With this object in view, the Asylum was opened, and Patients received from the higher and middle classes, at a board, fixed by the Managers, sufficient to pay all expenses, and afford a surplus for afterwards enabling the poorer classes to be received; and, indeed, to a certain extent, this object had, in some degree, been attained, as a considerable number of patients, who were quite unable to pay the usual board, had been admitted at a lower rate (only about a year before, as was shown); and this plan would have been carried to a greater extent, had not the managers been afraid that it would materially affect the object they always had in view—the admission of paupers. But he begged to call the attention of the Managers to a circumstance which had frequently been the subject of discussion—namely, the propriety, or, indeed, the possibility, of having an Institution combining the

cussed—all which were sent in according to Act of Parliament—are few and brief. The first of them (1816) states that there were two houses for the reception of insane persons, both in the immediate vicinity of the town of Aberdeen; one called the Aberdeen Lunatic Hospital or Lunatic Asylum—the other the Spital Lunatic Asylum. "The former is connected, and under the same manage-

admission of the higher ranks along with those of the poorer into one establishment. The opinion of a great many of their Medical friends was opposed to such a plan; and, so far as he could judge, it appeared to him that the two Institutions should be separate and distinct; but perhaps the most regular way of proceeding would be to request the opinion of their Medical Board on the subject. Should the opinion of the Medical Board satisfy the Managers that the Institutions ought to be separate and distinct, this would make a considerable alteration in its management; and in that case, he was humbly of opinion, that, in consistency with what they had always conceived to be the object of the Asylum, the Managers should dedicate such a part of their present funds as might be thought reasonable to assist in establishing an Institution for the reception of the poor classes; but the amount of this contribution must also be considered with reference to the expense of an additional building still wanted at Morningside to complete the plan of the separation of the Patients, which had so often been strongly urged by the medical gentlemen connected with the Asylum.' Sir Henry having concluded his observations, the meeting, after some farther conversation, expressed themselves 'unanimously of opinion that some provision must be made by the Managers of the present Asylum for the reception and treatment of Pauper Lunatics, and remitted to the Medical Managers, Medical Board, and Medical Officers, to report whether this could be best carried into effect by making additional buildings in connection with the present establishment at Morningside, or in its neighbourhood, or by contributing towards the erection of a separate public establishment.'" *(Report by William Scott, W.S., Treasurer to the Lunatic Asylum at Morningside, &c. July* 1836. *pp.* 25-29.)

It only remains to be mentioned, that the Committee, having taken this remit into consideration, on the whole recommended "that the Managers of the Lunatic Asylum should contribute such funds as may be within their power towards *the formation of a separate Pauper Lunatic Establishment*, and restrict their own Institution to the classes hitherto received into it—viz. persons whose circumstances admit of a sufficient board being paid for them, and, as far as may be possible, persons also of the higher and middle classes, who, from reduced circumstances, can only pay a very moderate board,—a branch of charity which the Managers have long exercised, and which the Committee believe to have been attended with the most beneficial results;" but that, in consequence of effectual opposition, as elsewhere hinted at, this recommendation, so far from being acted on, was abandoned for the *alternative* with which it stood connected; and that, though in possession of a plan for an addition to, or an extension of, the present establishment, designed to accommodate Paupers, while they have feued an extensive piece of ground in relation to the same purpose, the Managers of Morningside, with upwards of £10,000 at command, are still under the painful necessity rather to plead good intentions than to be thanked for discharging a great public duty. Laying aside all personal feelings, and the dread of censure, they cannot possibly avoid deploring the fact, that, after the lapse of nearly half a century, (the project having been suggested in 1792), during which, besides the prototype at Montrose, similar establishments have sprung up in provincial towns, and during which, also, be it specially remembered, several hundred thousand pounds have been bequeathed, in their own neighbourhood, for the erection of edifices much less demanded by existing necessities than commendable as architectural beauties,—the numerous pitiable beings, for whose relief they were to provide, are left without a single habitation in which the greatest of human calamities can be adequately treated, or which, by *pretensions*, not to speak of *reality*, befits the character of the Metropolis.

ment, with the Infirmary of Aberdeen—an Institution incorporated by Royal Charter in 1773. The latter was only opened in 1808, by a person who was formerly Keeper of the other Hospital, and is under the management or superintendence of the Senior Minister of the parish, and some other respectable gentlemen."* Though no notice had been given of his intention to visit, both houses were found very clean, and in good order. The management and treatment of the Patients in the former seemed entitled to great praise. One physician attended it daily; and, as often as necessary, two other physicians gave their assistance, while one of the medical Managers examined the Patients monthly; and a case-book, kept regularly, was laid before a Committee who met and inspected the house weekly. Medical visits were not so frequent at the other house, nor was a Case-Book kept in it, as, according to explanation, the Patients, few in number, were "persons whose disease had been of long standing, to whom any medical application would be entirely useless." The rules for the management of these two houses appeared very proper to the Sheriff, who did not think it requisite to suggest any alterations or additions; but he "requested that strict directions should be given to the Keepers not to inflict corporal punishments on the patients, there being reason to suspect that this, on a few occasions, had been done to a slight degree."†

"Next year, the Reporter found these houses in good order, and that the suggestions formerly made by him had, as far as practicable, been attended to. In the Aberdeen Lunatic Asylum, the same laudable attention to cleanliness, and to the comfort of the Patients, continued to be

* The Infirmary was commenced in 1740, after the examples of Edinburgh and Glasgow. Previously to 1800, when the Lunatic Asylum opened, insane Patients were received into that establishment, which, like that of Edinburgh originally, as elsewhere noticed, had "several ground cells" for their accommodation. "But, convinced of the injury which the other Patients suffered, by being under the same roof with Lunatics, the Managers were led to turn their thoughts to an institution entirely adapted to this humane purpose, and an Hospital was accordingly erected." (*Thom's History of Aberdeen.*)

This writer states that the fund, for purchase of ground, &c., was something more than £3000, "raised by voluntary contributions solely from the citizens of Aberdeen." He adds, "the expenditure is still partly defrayed from the same source, but the revenue chiefly arises from payments by the Patients;" though, according to him, in September 1810, there were 10 *on charity*, while 20 paid at the rate of £15, 6 at £20, and 3 at £25 annually.

† According to the appended Lists, there were at this time in the Lunatic Asylum 54 Patients—14 of whom were Paupers—"admitted on charity funds, under the patronage of, and recommended by, the Magistrates." I paid £40, 1 £35, 4 £30, 6 £25, 3 £20, all the rest either £15 or £10; while in the Spital Establishment, the number was only 10, at boards varying from £15 to £26.

given; and, in consequence, the opinion of the public has become so favourable to this Institution, that, in the course of last year, a number of applications for admission have, for want of sufficient accommodation, been refused. It indeed appears to the Sheriff that the Patients are now more numerous than they ought to be, it having become necessary that some of the bed-chambers should each contain more than one Patient—an arrangement which occurred to him to be attended with some danger; and he has thought it his duty to suggest to the Managers the propriety of altering it as soon as possible. It is proper to mention that it was the intention of the Managers to make a considerable addition to the building during the present season, so as to admit a greater number of Patients, and to make a more complete separation of the different classes; but the introduction of a Bill into Parliament for "providing proper places for the care and treatment of fatuous and furious persons in Scotland" has prevented their commencing the work."*

In 1818, the Reporter, having again adverted to the same or a similar bill, as occasioning delay of proceedings, says—"So that the inconveniences mentioned to have arisen from the want of accommodation for the numerous Patients received into the house still remain.† In every other respect, the Sheriff has the satisfaction to say that there appears no ground of complaint. No alteration appears to have taken place in the smaller Institution. The only recommendation which it occurred to the Sheriff, on inspection, to give to the Keepers, was a greater attention to the cleanliness and airiness of the common apartment in which the lower class of female Patients passed the day; and this was promised to be attended to."

Here we take leave of these official documents, though pregnant with other information of high value. Instructive and satisfactory on various points as the extracts from them may appear to general readers, it is of consequence to show their bearing on the subject of these Memoranda.

In the first place, then, be it remembered, the history of

* The Managers at Montrose, it will be recollected, were in the same predicament. At the date of the Report, the number of Patients in the larger House was 58, being 4 in addition, while that in the smaller had diminished to 7.

† They must have greatly increased, as the number of Patients was now 67; but, during the twenty years which have elapsed since this statement, the Asylum, besides having vastly improved in other respects, has obtained effective accommodation for fully double that amount.

any institution, such as the Montrose Asylum, cannot possibly be treated of in an adequate manner, without reference to the existing wants of society for which it undertakes to provide. Now, what was the state of Scotland in regard to this branch of charity at the commencement of the present century? The words, by no means exaggerated, of a writer in the *Scots Magazine*, under date June 1810, furnish a reply:—"The kingdom has long been distinguished by the number of its charitable establishments intended for the relief of the aged, the indigent, and the diseased. The metropolis is, in an especial manner, distinguished by a variety of humane and useful institutions; but it is a singular fact that, to this hour, it has never contained any proper receptacle either for the pauper or criminal maniac, and it may almost be said that there is not yet any commodious establishment of this kind in any part of Scotland. It has long been the earnest wish of the intelligent and humane to wipe off this national disgrace, and accordingly laudable attempts have lately been made, not only at Edinburgh, but also at Dumfries, Glasgow, and Aberdeen, *and, in a particular manner, at Montrose*, to provide both for the comfort and cure of the unhappy maniac." An answer of like import may be found in the striking fact, disclosed a few years afterwards by the Returns from the Clergy of Scotland to the House of Commons (1818), that, of the general total of insane persons (including fatuous), represented as amounting to 4,650 (assuredly, and, indeed, admittedly, an under-calculation), only 258 were stated to be confined in Public Asylums, while the number in Private Asylums was 159, 1356 lodged with their friends, and 2,877 (upwards of the half) were reported to be "at large."* According to the same authority, the respective numbers in Forfarshire were 276—30, 4, and 94. In so far as concerned its own necessities and those of adjoining parishes, therefore, Montrose, neither one of the largest and most

* Dr. (afterwards Sir) Andrew Halliday, writing a little before (1816) to Lord Binning, says, there were only two Asylums in the kingdom "*of a general and public nature*"—meaning that at Glasgow, begun in 1810, but not calculated to receive above 120 Patients, &c., and the merely embryo Institution at Morningside. As to the Asylums—at Montrose, at Dundee ("not yet in a state to receive patients"), at Aberdeen, and at Dumfries ("a branch of the Dumfries and Galloway Infirmary")—he remarks—not quite correctly, but without intending any disparagement—"all these are Private Institutions, and have no support but the voluntary contributions of benevolent individuals; and their power of doing good, limited when taken in the most extended sense, has been still farther contracted by the debts which have been accumulated, notwithstanding the strictest economy in the management of the funds."

wealthy of the towns in Scotland, nor the capital of a county, performed a duty, without presuming, save by quiet example, to advocate its importance and benefits.*

In the second place, comparison between different institutions is essential to determining their respective merits; and on this account the preceding Notanda are blameable rather for defect than excess. But, rightly to estimate them, or any thing additional in this view, regard must be had to sundry qualifying circumstances, as the exigencies of diverse localities, the ability of parties or means at command, the magnitude of design or the character intended, the peculiarities and even the prejudices or errors of the

* The number in Montrose Asylum alone at the period of the returns must have been fully 50; but some of the Patients did not belong to parishes within the county—a circumstance which may account for the discrepancy.

At a General Meeting of the Freeholders, &c., held at Forfar on 20th April, 1818. in regard to Lord Binning's Bill, one of the resolutions proposed *altogether denied* the grounds on which it proceeded,—"that extraordinary distress has been felt in Scotland from the neglected situation of Lunatics;" while another was to the effect of not admitting "the occasional occurrence of cases of distress to be a sufficient reason for the introduction of a new and dangerous principle into the poor-laws of this country." But more singular, in respect to statement, law, and logic, than either of these, was the following:—"That the claims of the poor to be cured at the public expense appear to be as strong in all cases of disease as in that of insanity; while, in the last case, the accomplishment of the object is not only the most uncertain, but is by far the most expensive, though the unfortunate persons themselves are the least sensible of any deprivation of comfort"—quite an epitome of those principles on which the insane had been so long either totally neglected or very ill treated.

At a subsequent Meeting, in which better sentiments on the whole prevailed, Mr. Sheriff Duff, vindicating himself from any blame in respect to a Pauper Lunatic then imprisoned at Forfar, said—"He was aware that a gaol was by no means a proper place for confining a Lunatic; but as the man was at times quite furious, was he to be allowed to go at large, to the danger of the lives of other people? His parish allowed him about £12 a-year. At the Montrose Asylum, he would be kept for £18. Here, then, for the small additional sum of £6 a-year, this poor man would be comfortably taken care of in a place erected for the very purpose. But, unless the parish give this voluntarily, there was no law to compel them to do it; and this case showed the necessity of agreeing to Mr. Wedderburn's motion." That motion, as afterwards altered, being in terms, "that some Legislative interference is necessary to the extent of compelling parishes to provide for the care and maintenance of their Pauper Lunatics," was understood to be unanimously agreed to (says the report in the *Dundee, &c., Advertiser* of May 3), and most of the gentlemen left the meeting. But Mr. Gardyne now said that he objected to the motion, and insisted that it should be put to the vote, and being seconded by Mr. Mill of Woodhill, the motion was carried—twenty-three to two."

Whatever wishes—doubtless reasonable—may be entertained on the subject, it will be thought strange in the present day, that, at a similar Meeting in Elgin (17th March, 1818), one of the resolutions, unanimously agreed to, embodied the following declaration:—"The laws that were early enacted in Scotland for this purpose (meaning a compulsory assessment in support of the poor), *and that are still unrepealed, have been allowed, for ages past, by the wisdom of our fathers, and by common consent, to become a dead letter in practice.*" A different tale has now to be told throughout a large part of Scotland, though still rather dreaded than known in Elgin, which, to its praise, be it spoken, afterwards built a Lunatic Asylum for behoof of county Paupers, chargeable on their parishes.

times in which the establishments were commenced. Due allowance being made for these, Montrose may cheerfully acknowledge the superiority of some of its successors in this field of humanity, without craving indulgence, or trusting to reputation, as their senior; and, in regard to one of them which promised the highest excellence and utility, the force of evidence—unhappily, be it said—goes beyond this moderate estimate. Thus, to take the judgment of persons who would have rejoiced in a very different verdict, a recent public document, after various minute and authentic statements, gives, under the title of "General Results," the following abstract, shewing, "at one view, the average number of Patients, and the average ordinary expenditure for each, in the different Institutions referred to, according to the (then) latest accounts:"

	Average Number of Patients.		Average Expense for each Patient.
"Edinburgh,	42	.....	£40 5 3½
Glasgow,	140	.....	23 12 2¼
Perth,	100	.....	23 14 1½
Dundee,	129	.....	17 6 4½
Montrose,	63	.....	14 10 1½
Aberdeen,	107	.....	14 6 3¾"*

Thirdly and Lastly.—Though those portions of the extracts which pertain to Montrose are encomiastic, and do not even imply censure in any one respect, so that simply to hold its past condition and status might be deemed the whole virtue required from its Managers, a very different practical lesson is inculcated by the early animadversions on other Institutions, and the consequent improvement which they have undergone; while, aside from the supposition of any radical change being necessary in order to effective competition, the information communicated on sun-

* "Report of the Treasurer's Committee to the Town-Council of Edinburgh on remit to consider and report regarding the best means of obtaining immediate accommodation for Pauper Lunatics." *(Approved of in Council, 7th February,* 1837*)*—p. 24. Considerable pains appear to have been taken in obtaining the means of comparison on which this document rests some of its strongest arguments against the policy adopted at Morningside; and the statements relative to Montrose, more especially, were taken, in part, "from a very able, elaborate, and extremely interesting Report of Dr. W. A. F. Browne, the Medical Superintendent of this Institution." Having noticed the *gratis Patients*, &c., it says—"The expense to the burgh for the maintenance of Pauper Lunatics, over and above the profit derived from boarders, appears to be £40 16s. 10d." It may be worth mentioning, as a sort of parallel to this—of course, *variable*—point, that, according to the statistical account published in 1834, twenty-seven Patients in the Asylum at Dundee cost the parish, for board, £380.

dry minor, but by no means insignificant, points, can hardly fail to be occasionally serviceable. It is surely of some consequence to know, for example, at what rates various classes of Patients are boarded elsewhere—the kind of accommodation afforded to them—their numbers in relation to extent of premises—the amount and kind of attendance with which they are supplied—and, above all things, the grounds on which adequate judges give the preference to public Asylums over private Houses, with few exceptions, in the care and management of the insane. But, be such and other matters valued as they may, these extracts have shown enough, both of contrast and analogy, between the Institution at Montrose and one in the south, ever to guard the well-wishers of the former against a perilous and most seductive error—hoarding public money with a view to great distant good, while urgent necessities continue unabated, and new candidates eclipse, by actual performance, the brightest visions of the loiterer.*

In introducing some of the Reports, now so largely descanted on, occasion was taken to regret their being unaccompanied with statements from the Medical Gentlemen selected as Inspectors according to Parliamentary Statute; and, in comparison with them on this account, no less than because of greater minuteness, a preference was awarded to others regarding more numerous establishments of the kind elsewhere. In some degree, and in relation to late years, the deficiency has been made up by the Professional attendants on the Institution; and to their communications, consequently, very marked attention is due, whatever abatement of reliance may be either justly or uncharitably made on the ground of personal concern in the subjects represented. These will be found equally various and important—of a nature, in short, so peculiar as to comprehend a large and highly interesting portion of history. But, before entering on them, it is deemed expedient to narrate certain proceedings with regard to the offices which these individuals successively held.

* It is rather a certainty than anywise hypothetical, that, had the judicious and truly philanthropic procedure of the Aberdeen, Glasgow, Perth, and, Dundee—we may safely add the Montrose—Managers been adopted at Morningside, the Establishment there would, by this time, have numbered little short of 300 Patients; and, though possibly without a reserved fund—nay, even with a debt—enjoyed inimitable repute, and absolutely boundless countenance, in return for, and prolongation of, corrssponding benefits towards Medical science and afflicted humanity.

Though the names of those who undertook duty are not regularly given in the minutes, and, therefore, can only be sometimes gathered from incidental remarks, the system of Monthly Rotation appears to have continued without challenge, or objection, till 7th January 1799, when Mrs. Carnegie's letter, formerly adverted to (page 6), was laid before the Managers.* "What I beg leave to recommend to your consideration," said that lady, addressing the Managers, "is whether the funds could not now afford a small salary to a Physician or Surgeon for attending the Hospital, and particularly for attending the Lunatics: one person to be nominated to that office for a year, and either to be re-elected next year, or another chosen, and as many of the Faculty in Montrose to take it in turn as choose to accept the charge. The salary that could yet be afforded—suppose from £20 to £25—would not indeed be an object of competition, but some compensation for a labour too great to be expected gratis. . . . It may be added that it is probable the relations of those Lunatics who are in good circumstances would gratefully acknowledge the services rendered their friends—that the Hospital would add another species of celebrity to that it has already obtained for cleanliness, decency, and humanity,—that more opulent boarders would pay the expense of the Paupers,—hence the salary of the Physician might gradually be increased, and the utility of the Institution might be carried to the utmost extent its limits can admit of. . . . Far be it from me to propose you should presently adopt the alteration I have thus sketched out. I only beg you will have the goodness to take it into consideration; after which, if the general plan of it should meet your approbation, it may be modified to your pleasure."

The Medical Gentlemen, to whom this communication was submitted for an opinion, reported, on 4th February thereafter, as follows:—"1. We approve highly of the very judicious advice given by Mrs. Carnegie. Being desirous that the pecuniary reward shall be enjoyed by

* One or two minor facts may be noticed: 7th December, 1789. "The Meeting recommended to the Physicians to report monthly what persons they think may be dismissed from the Hospital; and, if the Physician for next month is of the same opinion, the Meeting appoint such Patients to be dismissed." A few months before (February), "The Committee recommended the Physicians to hold a Quarterly Meeting in the Hospital, for regulating their own matters." But nothing is mentioned as the result of either arrangement. 1st June, 1794. "Mr. Robert Crabb, Surgeon, lately settled in this place, appearing at this Meeting, was admitted a Surgeon of the Hospital." Applications for the same object were usually made in writing at subsequent periods.

every one of our number, who shall have bestowed his time and attention gratuitously on this Hospital, we wish that the Senior Physician shall immediately take the charge, and that he shall be allowed to choose an assistant, or rather colleague, with whom he shall share the salary equally: That these two shall continue in office one year, and shall be succeeded in like manner by two others, until the honour and small emoluments connected with it shall have in this manner passed through our whole company in a regular rotation. 2. With respect to salary, we beg the Committee to consider our situation: We are all men dependent on our practice and on the public favor: We cannot alienate any part of our time to charitable purposes without being losers: Several of us have attended your Hospital with assiduity ever since its first institution, above eighteen years ago, without fee or reward, waiting patiently till your funds should be in a proper state: We should think £40 per annum a proper compensation for the trouble attending such a charge—which sum to be equally divided betwixt the attendant Physician and Surgeon; but we shall accept of any salary which the Managers shall think competent, provided it is not under Thirty Guineas. 3. The attendant Physician shall keep an exact and accurate Register of his Practice: A few remarkable cases will be expected from him—at least six in number—made out at full length, and fit for insertion in Dr. Duncan's Medical Commentaries. Wishing much success to this Charitable Institution, and much satisfaction of mind to you, the Honorable Managers of it, we remain," &c. (Signed by seven individuals.)

The consideration of these Resolutions or Regulations —for they are styled both—was deferred till 3d June following, when, being agreed on without division, the Meeting appointed Dr. Ross, as the Senior Physician, to take the charge for the ensuing year, with power to nominate his colleague. He instantly made choice of Dr. Crabb. "The Managers approve thereof, and grant to each of them a salary of £15, but reserve to themselves a right of judging of the propriety of continuing this Regulation beyond the period of one year." It was agreed on for another year on 3d June 1800, when the Meeting recommended the two Medical Gentlemen to keep Journals or Case-Books—one for the Lunatics, and another for Patients in the Sick-Ward: also, on 2d June 1801, when

" the Medical Attendants represented that, after extensive experience, they were fully convinced of the very great utility of the new Inoculation for the Small Pox, and were anxious to render it as extensive as possible,"—for which purpose, they had resolved, " with the approbation of the Managers, to give their attendance at the Dispensary two days of the week, in order to inoculate gratis all those who might apply." The Managers, accordingly, gave full effect to the proposal. With equal regard to the public welfare, the Medical Attendants, on 6th October of the same year, suggested measures for the prevention, &c., of contagious fever then prevalent, and met with due encouragement.

On 6th July 1802, the plan of Annual Rotation having again been sanctioned at the Meeting in June, Dr. Paterson gave in an " Account of the Medical Business of the Montrose Hospital during the twelve months past, ending 30th June,"—which the Managers approved, and directed to be printed,—at the same time recommending the Physicians recently appointed " to observe the same method during the period of their attendance; and, in respect thereof, direct the Clerk to discontinue the Monthly Report of the state of the Patients of the Hospital."* Many years passed without farther change in this respect than the necessary substitution provided for by the original arrangement, and, seemingly, with only a single interruption of harmony, almost too trivial for record.† At length, on

* These were merely brief statements as to the numbers treated, cured, &c., at the Dispensary. Several of the subsequent Annual Reports are quite similar, only mentioning numbers in all the departments.

† On 5th June, 1810, Dr. Gibson, having been appointed, apparently in the usual way, chose Dr. Paterson as his colleague. On 3d July following, the latter " objected to the principle on which he was chosen," and said " he would state his reasons at the next Meeting," when (7th August), having done so, the Meeting agreed to rescind the Minute of appointment, and thereafter nominated him and Dr. Gibson to take charge of the Hospital for the year. But even this did not prove satisfactory; and, as Dr. P. still declined to act, while he maintained his rights as a Manager, Dr. Crabb offered his temporary services, which were accepted,—the consideration of Dr. P.'s refusal being deferred till 4th September, when, as the same reasons were maintained, Dr. Crabb was formally appointed colleague to Dr. Gibson.

A few years before (1807), two of these Physicians took very opposite views in regard to the issue of wine and flannel to poor Patients, on the order of the Medical gentlemen, " although not attendant on the Hospital at the time." The Managers, after deliberation, authorized this privilege—reckoning these articles, it would seem, with " other remedies for the sick poor."

It may be mentioned, once for all, that various modes of providing the Institution with drugs were employed at different periods—that a Committee, on the state of the Funds, &c., recommended (14th January, 1812) them to be commissioned from London or elsewhere by the Medical Attendants for the time—but that the arrangement, though acted on for some years, is not now in force.

14th June 1814, when a motion, by the Rev. Mr. Dodgson, that the salary of the Medical Attendants should be increased to £25 each, was unanimously agreed to, Dr. Paterson (one of the Medical Managers) threw out for consideration—which, however, he did not then press—"whether it would not be proper to appoint an Assistant annually, along with the two principal Medical Attendants, with such a salary as to secure his regular attendance at the Hospital." He brought this forward again on 13th June 1815, in the shape of a motion, which was ordered to stand over; as also, on 4th June 1816, when the Clerk was directed to give notice of it in the circular letter for next General Meeting. Accordingly, having been substantively put to the vote (11th June following), and seconded by Mr. George Paton, it was declared to be lost by a majority of 16 to 4.*

*An episode may interest the lovers of medical controversy. At the next Monthly Meeting, ordinary business being finished, Dr. Gibson moved "that, an anonymous paragraph having been inserted in the *Montrose Review* on the 14th of June last, from which it appeared that the Patients in the Lunatic Asylum here did not receive the benefit of Medical assistance, the Clerk be instructed to write Mr. Watt, the editor, requesting that, in his next paper, he contradict so unjust an assertion; as the Meeting can assure the public that the Patients in the Asylum have, from its first institution, been constantly and regularly attended to by proper Physicians. Which motion having been seconded by Dr. Crabb, and the votes called, the same was carried by a great majority. Whereupon the Meeting direct the Clerk to write Mr. Watt, contradicting the assertions in the anonymous paragraph alluded to, as they are not only unfounded, but injurious to the character of the Institution."

The paragraph, purporting to be a notice of the Annual Meeting's transactions, contained the following sentences:—"Dr. Paterson introduced the very important subject of permanent Medical attendance to Lunatics. He maintained that mental derangement is not a primary disease, but a secondary one, uniformly the effect of bodily derangement or disease; and hence urged the great necessity of paying very particular attention to the physical as well as the moral treatment of Lunatics, and of both the one and the other being conducted by a skilful Physician. He condemned, in strong terms, the trusting the cure of insanity to moral treatment only by a Keeper, as has been the practice here these thirty-five years past; and concluded by moving that a skilful Physician should be permanently appointed, &c. The motion was seconded by Mr. George Paton, and supported by Dr. James Ross, but opposed by Dr. Gibson, on the ground that Moral treatment only is required for Lunatics, Medical treatment being merely ideal. Being put to the vote, the motion was lost by a great majority," &c.

In the next No. of the same Journal (June 21), appeared a letter from Dr. Paterson, together with a copy of his speech at the Annual Meeting. The former, and, indeed, part of the latter—or rather a postscript note to it—show what may perhaps have been just indignation. "Certain persons, who ought to be better disposed, having been so very illiberal as to assert that what I advanced on the subject of Insanity, at the Annual General Meeting, &c., was false, and from sinister motives; that, consequently, I dare not give it publicity; and that there was not the least necessity for the motion I made; I request you to give a place in your Journal to the following observations and motion, which, in substance, are as they were submitted to that Meeting. However little their merit may be, it will be found that they were not aimed against the character nor the interest of any one. Besides, several of the Managers, both for and against my proposal, having expressed their desire to see them published, it is

Not discouraged by this result, Dr. Paterson, on 6th May 1817, intimated his resolution to try the proposal

right that the public, on whose candour I confide, should not only be made acquainted with the subject, it being of a public and interesting nature, but have an opportunity of judging between me and those who have acted so illiberal a part towards me on the occasion." "The motion," says the note, "was opposed by Dr. Gibson, on false, unscientific, and mischievous grounds, according to my view of the subject. Alas! the motion was lost: only four for it, and fifteen against it."

Portions of the speech are still of value, in relation to history, as well as on another account. "With regard to the very important question now before this respectable Meeting, I beg leave to observe that it is not a new one; neither has it been hastily thought of, nor hastily brought forward. These twenty years past, I have repeatedly, and most disinterestedly, but ineffectually, proposed the same salutary regulation. Heretofore, many causes, some of them not very much to the honor of human nature, have operated in retarding improvement in the treatment of Insanity. These thirty years past, I have felt deeply interested in the prosperity of the Asylum under our protection; during which time, and from information derived from various sources, enough has come to my knowledge to convince me that, if a more correct and efficient plan were universally adopted for the alleviation and cure of mental derangement, than has hitherto been pursued, the consequences would be no less important than gratifying. But, seeing from what has passed and is passing in Parliament, that humanity is already roused, and that genius will soon be so too, let us hope, that, in future, melioration in the treatment of Lunatics will be progressive and satisfactory."

Having, then, at considerable length, stated his views as to Insanity being the effect of bodily derangement—"in fact, of diseased action, variously induced, of the brain, the source of the nerves, the organ of intellect"—whence he deduced the propriety and necessity of skilful Medical treatment, which comprehended Moral, he proceeded:—"Finally, with regard to our Institution, allow me to observe, that to the Lunatic Asylum a public Infirmary and Dispensary for Out-Patients have always been attached: for the first twenty years, all the Medical Practitioners in town, singly, in their turns, monthly, and gratuitously, attended them: these last fifteen years, the greater part of them, two and two, also in their turns, but yearly, for a very small salary, making in common two visits in the week, and having at the same time their own private business, often far in the country, to occupy their attention. Being of opinion that these modes of attendance, more especially with regard to the Lunatics, were liable to serious objections; and that the treatment of the Lunatics was too much entrusted to the Keeper, illiterate, but experienced in his business, and wonderfully humane; I have these twenty years past, it must be repeated, frequently and most disinterestedly proposed that a skilful Physician should be permanently appointed to take charge of Lunatics: but, unfortunately my proposals,—the Medical Gentlemen thinking unfavorably of them, and the Managers in general not seeing the force of them,—have hitherto been rejected. However, hoping to be more successful on the present occasion, I move," &c. &c.

Immediately following this communication is a letter from Dr. Gibson, of which, in strict justice to all parties, corresponding notice must be taken. Referring to the original paragraph, as erroneous and injurious, &c., he especially objects to it because an opinion, said to have been given by him, "is completely exaggerated and misrepresented;" while, he adds, "the whole article is drawn up in such a manner that it appears to me to have been done with a most malevolent intention." One averment, assigned to Dr. Paterson, he declares to be far from the truth,—inasmuch as "from the first, a Physician was appointed to attend, principally upon the Lunatic Asylum; and the Patients in it have constantly received every aid which Medical art could afford, or their cases admit of," &c. As to his own allowed opposition, the reply is plausible, if not cogent: "I began by saying, that I so completely agreed with the principle of the motion, that were we now forming a plan for the Medical attendance on this Institution *de novo*, I would certainly propose that a permanent Medical Attendant should be appointed to the Lunatic Asylum, another

again at the next Annual Meeting. He did so, but was so far effectually opposed, by a motion for delay of con-

to the Infirmary, and a third to the Dispensary, who might assist one another in all urgent cases requiring consultation or Surgical operation. But, as this plan would probably exclude some of the older practitioners, who had done much at the beginning to establish the reputation of the Institution, and likewise some young men who might be emulous to offer their services, I did not think it at present expedient."

On the *theoretical* part of the question, he says, probably no less sarcastically than decidedly: "With regard to the great advantages which were to be expected from the plan proposed by Dr. Paterson, founded on some new discovery relative to the origin of Insanity, as stated in a long paper read to the Meeting, I did say that I looked upon them as visionary. For, though it was with regret I mentioned it, it was my opinion, after a pretty extensive experience, that in a great number of cases which come under our care in the Asylum, little benefit was to be derived from medicines, strictly so called, or drugs; for that in the whole Materia Medica there was only one internal medicine, (alluding to *Tartar Emetic*), on which I placed much reliance for the cure of Insanity." He admits, however, a great deal in what follows: "Yet, even in such cases, something might be done towards a cure—much toward alleviation, by proper general management, by restraint where necessary—in a word, by the skill and attention of a humane and intelligent Keeper, acting under the superintendence of a Physician:" And he therefore concludes, not quite logically: "Hence I thought no expense or trouble should be spared in procuring proper Keepers for the Asylum. Whereas, if a very large salary was to be given to a Physician, it might be prejudicial to the other branches of the Institution, and, with a great show of advantage, would produce no essential benefit: nay, I would not be surprised to see such an appointment dwindle down into a mere sinecure. In the Lunatic Asylum, much must depend on the attention, skill, and humanity of the Keeper; whereas, in the Infirmary and Dispensary, every thing depends on the Physician. On these grounds, I opposed the motion as incomplete, and at present inexpedient; and in this opinion, nearly the whole gentlemen present, including five Medical Managers, coincided."

The number of the Journal for July 5, besides inserting the minute agreed on by the Managers, and communicated by their Clerk, contained two letters on the subject—one in reply to Dr. Gibson, by Dr. Paterson—the other subscribed "A Citizen," who, wishing to be guided in the matter by "experience and the evidence of facts," proposed that some of the Medical Gentlemen or Managers "would lay before the public a compendium of the number of Lunatics, for a series of years, that have been inmates of the Lunatic Asylum, and what part have left it yearly cured, compared with the numbers in St. Luke's Hospital, London, or at the Retreat, York," though he preferred statements from the Asylums in Scotland. Passing over this very reasonable suggestion, there are a few points in Dr. Paterson's rejoinder to be noticed.

As to the fact insisted on by Dr. Gibson, regarding Medical attendance from the first, &c., he claimed actual concurrence in statements to a similar extent, but he adds—"I never could say that they (the Managers) ever appointed any Medical Attendant to the Lunatic Asylum principally;" and, as to the Patients in it having constantly received Medical aid, &c., he says most pointedly—"It proves nothing to the purpose, for, to my own knowledge, it merely implies that the Lunatics, when labouring under distinct bodily disease, had the benefit of such assistance." Regarding Dr. Gibson's hypothetical proposal as to three Physicians for the different branches of the Institution, the comment is—"Considering the nature of our Infirmary and Dispensary, this is certainly too much of a good thing, and only meant, with what immediately follows, to prepare the way for the negative part of his argument,"—meaning the consequence of the plan, if carried into effect, namely, excluding some of the older practitioners, &c.—which, so far from regretting, he would call highly expedient "with regard to the Lunatics." Then, as to Dr. Gibson's practical views—the little benefit to be derived from medicines (*Tartar Emetic* excepted)—while it is admitted by Dr. G. that proper treatment by a Keeper, *under* a Physician, can do much, the question is asked—"Why not the Physician make

sideration, that another year had to pass before it could be deliberated on; and this period he seems to have volun-

proper Keepers?" Dr. Gibson's concluding and pithy observation, touching the relative agency of Keeper and Physician in their respective spheres, is disposed of thus:—"What does all this mean? Does it not prove, beyond a doubt, that the Doctor would sacrifice the interests of the Lunatics to what he thinks expediency? And does it not also prove that, in the cure of Insanity, he lays by far the greatest stress on moral treatment by a Keeper. But I must tell the Doctor, hoping he will excuse me, that a Physician will do as little good in an Infirmary or Dispensary as in a Lunatic Asylum, if he merely administer *Tartar Emetic* to his Patients, and leave the regimen to be prescribed by the Sick Nurses." Lastly, Dr. Gibsou's fear of injury to other parts of the Establishment, from granting a large salary to a Physician, is held to be groundless; because, says Dr. P., "the funds of the Institution are perfectly adequate to the purpose; because, if *Tartar Emetic* were not exclusively used, the appointment would not fail to raise its reputation, and, of course, increase, instead of diminishing, its profits; and because, fortunately, if not, the Managers, Commissioners, and Inspectors, to be appointed by Government, would, as far as might concern the Patients, keep the Physician, as well as every other person, to his duty."

Dr. Paterson concludes:—"With regard to Dr. Gibson thinking that no expense or trouble should be spared in procuring proper Keepers for the Asylum, I must farther observe that our present Keeper, Mr. Booth, from his long experience and extraordinary humanity, being equal to any in the kingdom, and fully capable of executing any instructions or plan, renders the Doctor's thoughts on the subject nugatory."

The chief and avowed belligerents, manifestly retaining their sentiments and disposition unchanged by collision—a very common phenomenon, by the way—came no more openly into the field, which, however, was inviting enough for others, who thought masks convenient. Thus, in the Journal of 12th July, "An Illiterate Person," having expressed surprise at "the *pathology* of Dr. Paterson," and something like resentment at that Gentleman's supposed reflections against Mr. Booth, whose good qualities were really acknowledged on all hands, ventured to institute a threefold division of Lunatics, as requiring distinct consideration, &c., and to give it as his opinion "that humane moral treatment, and a regular regimen, are more beneficial than all the medicines that can be administered to them"—a proposition which, supposing it demonstrable, was quite consistent with Dr. P.'s practical views. The same writer suggested the erection of a piazza in the east garden, near the Mount, as a retreat and place for diversion, &c. "Such a fabric," he remarks, "is essential to the Institution, as some of the unfortunate Maniacs lie supinely on the turf for hours together, which must be very injurious to their health and spirits." And he concludes:—"As an erection of this kind can be made at a very small expense, and would contribute much towards the ease and comfort of the Patients, I trust the Committee will have the goodness to take it under their serious consideration."

The main purport of another letter, signed "*Simon Twissel*," in the Journal of July 19, was to obtain information regarding the state of the funds as absolutely leading to a termination of the controversy one way or other,—the writer being clearly of opinion that, if there were ability in this respect, the appointment proposed by Dr. P. should be made; while he says, on the other hand, "however useful an Attendant of this description would be, &c., the Managers must give way to the plea of necessity, and measure out comforts only in proportion to the means placed at their disposal." He closes by noticing "a palpable error in the Managers' Minute" (published in the *Review*), because "calculated, in no small degree, to operate against the true interests of the Institution"—an observation somewhat surprising, inasmuch as the correction offered, he being "*credibly informed*," related solely to the expression "by a large majority," whereas "there was not a dissenting voice to the resolution, therein set forth, but Dr. Paterson's.

The call for information regarding funds could be deemed reasonable only by those who did not advert to the Annual Reports, regularly published and always accessible.

tarily lengthened out,—the subject, in the same form, or indeed any other, not being agitated for several years. The system, consequently, was persevered in without material variation.*

Eventually, however, two of the Medical Gentlemen (Dr. David Paterson being one—Mr. James Wills, Surgeon, the other) revived the discussion by a statement too plain and forcible to brook more quiescence. It appeared in a Report (presented 10th June, 1828), which, after giving a summary of the Medical Business of the Institution during the past year in the usual manner, proceeded to offer "a few observations, *in a plain way*, with the view of eon-contributing to its further improvement." The first of these alone concerns the present theme. "Lunatic Asylum:—This department, for various reasons, more especially claims our attention. To be sure, a great deal has been done to render it commodious and comfortable; but, at the same time, it must be confessed, much still remains to be done. The Patients having become numerous, much more is required than formerly, when the Establishment

* In consideration, probably, of Dr. Bate's state of health, the Meeting of 11th June, 1822, appointed Dr. Palmer, and Mr. David Niddrie along with him, to take charge, &c., granting them £25 each of a salary, but declared "that the present proceeding shall not be held or construed into any precedent in future, either as to the number of Medical Attendants, or the rate of salary to be granted to them." At the same time, the Treasurer was directed to pay £6 5s. to Dr. Crabb, who had discharged the whole duties after the death of Dr. Alexander,—"being the sum retained from Dr. A.'s salary." 10th June, 1823: Dr. Hunter intimated that, from age, &c., he could not render any farther assistance in the Medical Department. Thanks were voted to him for long and faithful services. At this meeting two Medical Gentlemen, who had previously offered to act when called on, communicated their declining to be nominated.

8th June, 1824: "On the motion of (the Rev.) Dr. Joseph Paterson, the meeting direct that the fee of 10s. 6d. received from Government for each cure of seamen from the Navy be paid to the Medical Attendants for the by-gone year, and also to the Medical Attendants of preceding years, of any fees received during their attendance; and also to pay to the Medical Attendants of the current year any fees received during their attendance." The arrangement touching the admission of seamen was entered into after correspondence with the Commissioners of the Victualling Office (in 1821.)

At the Meeting of last-mentioned date, Mr. James Ingram (then Keeper), who had some time before been acting as Apothecary, (in the room of James Booth, resigned), for six months, at the rate of £15 per annum,—"The House Committee being empowered to continue him for the remainder of the year, if, in the opinion of the Medical Attendants, found qualified—was appointed Keeper and Apothecary on a salary of £63."

4th October, 1825: On the removal of Dr. Palmer to Arbroath, Mr. Niddrie was chosen to supply his place as a Medical Attendant.

12th June, 1827: "Dr. Joseph Paterson gave notice that at next Annual General Meeting he would move that the duties of the Medical Attendants be extended, and their salaries increased:" and Dr. David Paterson gave notice of another motion—namely, "that the Dispensary should be removed from the Hospital to some more central situation for the convenience of out-Patients."

was on a very limited scale. The first thing that strikes a person scrutinizing the arrangements of this branch of our Institution, is the want of proper, that is to say, of permanent, Medical attendance. It is now very generally acknowledged that the services of a well-qualified Medical man cannot be dispensed with in a Lunatic Asylum containing so many Patients as there are in ours,—not only for the purpose of investigating the cases of the pitiable inmates, and prescribing medicines, diet, and moral treatment, but of duly arranging all things relative to them, for, in a Lunatic Asylum, there is very little indeed that does not resolve itself into Medical treatment. But, with an appointment of only six months (the duty having been divided between the two attendants), with a scanty allowance, not deserving the name of a salary, and with other avocations on which his very existence depends, has a properly qualified Medical person time or encouragement, or is it possible for him, to make the arrangements alluded to, and to do justice to seventy or eighty Patients? No, he has not, he cannot, he dare not." Then, speaking of the Dispensary Department, sentiments perfectly concurrent are delivered:—"It is with inexpressible sorrow that we find ourselves under the absolute necessity of stating to the Managers that the duties of this branch are so much increased, more particularly by attending the sick poor at their own houses, as to render it utterly impossible for one person to perform them properly, and at the same time to do justice to his own feelings, or to his private professional concerns; therefore, if the Managers are determined on continuing the Medical duties on the same shifting rotatory plan as heretofore, we would be induced to propose some modification of it, and hence earnestly to urge the immediate necessity of dividing the town into two districts, as equal as possible, and of appointing three, in place of two, Medical Attendants to perform the duties of the Institution—one for the Lunatics and Infirmary, and two for the Dispensary and Patients confined at their own houses—the Medical Attendants to agree among themselves as to taking their turns of these duties—the salary to be increased to £90, or as much more as the Managers may be disposed to allow, and equally divided among the three Attendants. There being six Medical Attendants attached or belonging to the Establishment, of course three of them would be on duty every

other year. By this plan, which is at once the most simple and efficient that can be devised, the Medical duties will be diminished, while the emoluments will be increased to a very great degree, either way, compared with what they are at present."

Simultaneous in appearance with this cogent document were certain resolutions of six gentlemen (headed by Dr. Gibson), who had hitherto acted as Medical Attendants. It was to the effect that, understanding some of the Managers wished the Sick Poor within the burgh should have the benefit of more extended services when confined to their own houses, "and that the same should be compulsory on the Medical Attendants for the time being," they had considered the matter, and were of opinion "that such a duty would be incompatible with the other duties of the Attendant;" and, accordingly, they proposed, as more suitable, "that the town shall be divided into as many divisions as there are Medical Attendants, and that a Medical Attendant shall attend the Sick Poor of each such division when necessary, gratuitously, at their own houses, on producing a certificate from one of the Managers, an Elder of the Established Church, or one of the Dissenting Clergymen, that such are proper objects of the Charity: in case of extreme danger or accident, such certificates to be dispensed with."

The Managers—probably not a little at a loss how to decide in the dilemma thus encountered—appointed a Committee for consideration of the former proposal, with instructions to report thereon at next Annual Meeting. Meanwhile, on the motion of the Rev. Dr. Paterson, they agreed that the salaries of the Medical Attendants should be increased to £40 each "for one year only."

Accordingly, on 9th June 1829, a Report from the Committee (Mr. Charles Barclay being Chairman) was presented. It set forth, in the first place, the receipt of a letter from Dr. Gibson, "in which he expressed regret that other engagements prevented him from being present, and at the same time stated that, in his opinion, no alteration on the present mode of Medical Attendance is necessary, or should be recommended." But, notwithstanding, "The Committee, having afterwards proceeded to consider the suggestions in the Medical Report, in regard to the appointment of a permanent Medical Attendant, are unanimously of opinion that this is an object well

worthy of the attention of the Managers of the Institution, as soon as the state of its funds would render it advisable. In the meantime, the Committee would beg to suggest that, in place of the present arrangement of having only two Medical Attendants, the number should be increased to three, and the present salary divided amongst them."* On this being read and considered by the Meeting, the Rev. Mr. Smith moved "that no alteration be made on the present arrangement of the Medical Attendants for the ensuing year, or of their salaries;" and the motion was agreed to, seemingly without division. But, thereafter, Mr. James Burnes moved "that a Special General Meeting of the Managers be held on the first Tuesday of November next, for the purpose of taking into consideration the suggestion of the Committee, as to the appointment of a permanent resident Medical Attendant," and, in consequence, that the Secretary be instructed to intimate the same, by circular letter, in due time. This motion, seconded by the Rev. Mr. Brewster, was unanimously agreed to. At the same Meeting, according to the first resolution, two Medical Gentlemen were appointed as before, with a salary of £40 each.

3d November, 1829: Provost Jameson in the Chair, and in all thirty-four Managers present, "the object of the Meeting having been explained by the Chairman, Mr. Burnes, in reference to his motion, &c., submitted the following Resolutions:—1. That, with a view to promote the general interests of the Institution, and to secure a better classification of the Lunatic Patients, and a more complete and constant superintendence of them, it is expedient to appoint a permanent Medical Attendant to the Royal Lunatic Asylum at Montrose. 2. That, at the term of Whitsunday next, such an officer shall therefore be appointed for such length of time as shall be deemed advisable, and to him shall be committed the sole charge, superintendence, and responsibility, of the Lunatic Department of the Institution,—he being always subject to the authority and direction of the Managers in General or Monthly Meeting assembled. 3. That it shall be his especial duty to superintend and classify the different Lunatic Patients —to keep a book or register of the dates of their admission —the age, the previous health and habits of the Patients—

* It will be understood that the Report touched on other matters not now reviewed. They were taken up *seriatim*.

and the incipient appearances of the malady, in so far as these particulars can be ascertained. It shall be his duty to study the particular case of each Lunatic Patient, watch the symptoms and changes in the state of the malady, and carefully record the same at least once a month in the said book or register, narrating at the same time the Medical or Moral treatment he has adopted in each case. 4. That in case of accidents, or when not exclusively occupied with his duties in the Lunatic Department, the said permanent Medical Attendant shall be bound to assist in discharging, along with the other Medical Gentlemen, the duties of the Infirmary and Dispensary within doors; but he shall in no case engage in private Medical practice, but shall strictly confine his attention and practice to the Patients of the Institution; and he shall further, if required by the Managers, take under his charge, and instruct, in all the points of his department, one or two Apprentices, but without thereby incurring any expense upon himself. 5. That the salary of such permanent Medical Attendant shall be £150 per annum, in full of every allowance. 6. That at the Annual General Meeting in June, there shall be elected, as formerly, two Medical Attendants for the year ensuing, to whom shall be committed the whole Medical and Surgical duties of the Infirmary and Dispensary, as well as the duty of visiting the out-door Patients of the Institution; and, in the discharge of these duties, they shall be entitled to request the assistance of the permanent Medical Attendant, both in the performance of operations and the other in-door treatment of the Patients; but this power of requisition on the permanent Medical Attendant shall in no case be allowed to interfere with the discharge of his own exclusive duties. 7. That the said Annual Medical Attendants shall at all times, when specially required by the permanent Medical Attendant, afford him their best advice and assistance in regard to the Moral or Medical treatment of any of the Lunatic Patients under his charge, and a Minute shall be entered in the permanent Medical Attendant's record of every such consultation and the result. 8. That the said two Medical Attendants shall be bound to visit the Infirmary each, personally, at least twice in the week, and to divide the out-door Patients among them in such a manner as that the humane purpose of the Institution shall be fully accomplished. 9. That the salary of each of the said two Annual Medical Attend-

ants shall be £20 per annum, in full of every allowance. 10. That advertising for Candidates, fixing the period of engagement, and all other minor details resulting from, and rendered necessary by, the adoption of these Resolutions, shall be referred to a Committee, to be now named, whose duty it shall also be to consider and report what steps shall be taken to meet the increased charge on the funds of the Institution, in the manner least burdensome to the public."

These Resolutions were seconded by the Rev. James Brewster (Minister of Craig). But, to the first of them, on which, it is evident, others depended, Captain Thomson moved, as an amendment, "That the Institution remain in its present state in regard to Medical attendance;" and this being seconded by Mr. William Gordon, and the votes taken, there were found—12 for the motion, and 22 for the amendment, which accordingly was declared to be carried.*

The subject, thus effectually decided for a time, was neither resumed, nor even incidentally alluded to, at next Annual Meeting, when, as before, two Medical Gentlemen were appointed, with the same salary, and Mr. William Gibson, Surgeon, was placed on the list of the Medical Attendants.† A like remark applies to the Annual Meeting of 14th June, 1831, at which, it is worthy of notice, a larger number of Patients than usual was reported, with upwards of £70 of board more than that of the former

* Drs. David Paterson and Gibson were both present, and, as might be expected, adhered to their respective opinions. Besides the former, with the mover and seconder of the resolutions, there were on the same side, Provost Jameson, Rev. Andrew Fergusson, Alexander Keith, Robert Barclay, John Dodgson, Patrick Cushnie, Messrs. Patrick Craigie, John Beattie, and Charles Barclay.

† One of the two (Dr. Carr) having died in the course of the year, an Extraordinary Meeting (7th May) requested the Provost to apply to Mr. Niddrie, who had been acting for Dr. Carr, to continne his services until the General Meeting, "or, in case he shall not find it convenient, to the next person in rotation, as a Medical Attendant." Mr. Niddrie's name alone appears at next Medical Report, and thanks were voted to him solely for attention, &c., during the last two months. In all probability, a very unusual Notandum in the Treasurer's statement,—namely, "*Deduct salary not called for*—£40,"—related to one of the Medical Attendants. Still more important is it to keep in view that the House Committee, reporting to a Monthly Meeting, 4th October, 1831, suggested the expediency of diminishing the outlay in the Dispensary Department, by regulating the consumpt of wine and flannel; while they specially noticed the evil arising from neglect of the original mode by which the admission of Patients to that branch of the charity had been regulated—namely, recommendation by a Manager or contribntor of one guinea per annum. Relaxation in this respect, as is clearly shown, had proved most injurious during the time in which such articles were bestowed. The discontinuance of them soon afterwards served, by economizing the funds, to bring about the measnre so long and ardently contended for.

year; while "a great deal of furniture to beds, and other things for the comfort of the Patients, had been added," besides £216 15s. 3d. (out of £300 placed at the disposal of the House Committee) expended on washing house, &c.

Sundry matters, of a very important nature, and incidentally bearing on the appointment now considered, came before the Annual General Meeting of 12th June, 1832, in the shape of Reports from the Medical Officers, the House and a Special Committee. One of them in particular essentially tended to reconsideration of the question so long agitated, inasmuch as the establishment of a New Infirmary, resolved on shortly afterwards, implied, of necessity, some change in regard to professional duties. The Meeting, nevertheless, adhered to the usual system, by nominating two Medical Attendants, with the same salary; and the year passed without either modification in this respect, or any distinct proposal towards it. Less business of a general kind, and nothing particular in relation to the subject, occupied the Managers on 11th June 1833; when, however, in explanation of apparent dilatoriness, a Committee, appointed to procure plans and estimates for an Infirmary and Fever Ward, reported that "they did not see how the resolutions of the Managers could prudently be carried into effect." But, towards the end of the year, at an Extraordinary General Meeting (21st November), called for the purpose of disposing of a Report from the House Committee and Medical Attendants, "on the state of the Asylum,"—referring to some internal transactions which demanded scrutiny and remedial measures—the former, with an addition of numbers, received directions to investigate the whole, as also to consider and report "whether any change, and to what extent, they would recommend in the Medical and General Superintendence of the Asylum." One highly important consequence, brought forward, 4th February, 1834, was a recommendation, to be taken up at next Annual Meeting, "that a change should take place in the Medical and General Superintendence of the Institution." "As to the extent of such change," we are told, "the Committee, in consideration of the advantages derived at other Institutions from the services of a permanent Medical Attendant, resolve to recommend the appointment of such an Officer, under whom there should be a Head-Keeper and Matron, at reduced salaries: that the salary to be given to such

Medical Attendant, whose whole services will be required, should be a sum from £150 to £200 per annum; and, to secure the assistance of the present Medical Attendants, the Committee recommend that they should be allowed £60 per annum, payable in equal portions, or annually, to the two Attendants, who may be employed in rotation, as at present. That to carry these alterations into effect, and on the understanding that the salary of the Medical Attendant is fixed at £150, that of the Keeper at £30, and Matron at £20, the additional expense to the Institution would not exceed £70 per annum; but the Committee would, in the circumstances of the case, recommend that the change should take place, although it involved a much greater charge."

This very explicit report, signed "Wm. Jameson, Convener," having been read and deliberated on, was unanimously approved of by the Special General Meeting (consisting of 24 Managers), in so far as regarded the appointment of a permanent Medical Attendant; and accordingly the same Committee, with the addition of the Rev. Mr. Brewster and Mr. James Burnes, were directed to frame such Rules and Regulations as might be advisable, "consequent upon carrying the resolution into effect,"—authority being at the same time given to the next Monthly Meeting "to advertise for such Medical Attendant, if they see it expedient and proper so to do." At that Meeting, 4th March, the Committee reported the Rules, &c., on which they had agreed, and suggested the propriety of having them printed and circulated, with a view to being thoroughly digested at another Special General Meeting. Instruction to that effect was accordingly given, and the Committee got authority to advertise for a Medical Superintendent, such as had been resolved on, "to whom a liberal salary will be allowed."

1st April, 1834: 23 Managers present—the Rules, &c., were approved of, "subject to the final approval (so far as regards the Bye-laws) of the General Meeting in June next;" and thereafter the Managers, "having agreed upon the duties of the Medical Superintendent, proceeded to deliberate as to the time of his employment, and the amount of his salary and emoluments, when it was resolved that his appointment should be for three years, subject to any alteration which may be made on his duties by the Managers from and after his appointment, and that his

salary shall be £200 per annum, in full of all perquisites and emoluments whatever." At the same Meeting, the salary of the Head-Keeper was fixed at £36, and that of the Matron at £20 per annum, and the Committee got instructions to advertise accordingly,—the Secretary being directed to communicate to applicants for the superior office the Rules, &c., adopted, and to request testimonials to be forwarded ten days before the Monthly Meeting in May, "when the Managers resolve to proceed with the appointment, and to hold a Special General Meeting for that object."*

6th May, 1834: 33 Managers present—Provost John Barclay in the chair. After some ordinary business, "Mr. Jameson moved that, in terms of the previous resolutions of the Managers, this Special Meeting do now proceed to the election of a Medical Superintendent,"—which motion was seconded by Mr. Charles Barclay. But, before proceeding to the vote, the Rev. Dr. Paterson gave in a formal protest against the proposed arrangement, on sundry grounds, concluding the same to be "unnecessary, incompetent, and most injurious to the interests of this charitable Institution,"—to which Mr. William Mudie adhered, —when the motion having been put, and the votes called, "the whole Managers, with the exception of Dr. Paterson, Mr. Mudie, and Mr. Small, agreed to proceed to the election."

Accordingly, "The Testimonials from the various Candidates having been considered, the Meeting agreed to reduce the number to the following gentlemen, viz.:—Dr. James Ogilvy of Montrose; Messrs. W. A. F. Browne, Surgeon, Stirling; William Spence, Surgeon, Bethnal Green, London; James Henderson Carfrae, Surgeon, Edinburgh; John Panton, Surgeon, Glasgow; Dr. William Reid, Edinburgh; Messrs. Patrick Wood, Surgeon, Edinburgh; John Forbes, Surgeon, Brechin; and Theophilus George Pierce, Cheshire County, Lunatic Asylum, Chester. And the votes having been called and marked, twenty-two of the Managers present voted for Mr. W. A. F. Browne, four for Dr. James Ogilvy, two for Mr. Carfrae,

* The Rules, &c. are under different heads—namely, General Bye-laws—14 in number; House Committee—6; Duties of Medical Superintendent—12, comprehending eleven queries to be put to friends, &c., of Patients on reception; Medical Out-Door Attendants—4; Duties of Head Keeper—8; Duties of Matron—6. They were confirmed at the Annual Meeting of 10th June following, and are still substantially in force.

and one for Mr. Spence—whereupon the said W. A. F. Browne was declared duly elected."*

On 10th June next, "the Rev. Robert Smith moved that this General Meeting approve of the appointment of Dr. Browne as Medical Superintendent for three years, which was seconded by Mr. Mudie;—whereupon Mr. C. Barclay moved, as an amendment, that Dr. Browne's letter of acceptance, now read to the Meeting, be engrossed in the Minutes without further observation, which was seconded by Mr. William Jameson; and the votes being called and marked, the amendment was carried, and the letter ordered to be engrossed."†

Of the benefits derived from the appointment thus at length happily brought about, and with which, probably, the few who had opposed it were among the most cordially satisfied, it is unnecessary to treat in this place. Suffice to say, that Dr. Browne, fully alive to the claims of humanity and science, pursued a career of services, no less dignified than of the greatest utility, during a period of about four years; and that, as might consequently be anticipated, the intimation of his purpose to relinquish them, though for a more extensive sphere of professional duties, was received by the Managers with feelings of sorrow and apprehension. The proceedings, in a matter so instantly urgent, and likely to be followed with singular disadvantages to the Institution, however fortunate the

* At the same time, the Meeting, having perused the testimonials of the various candidates for the offices of Head Keeper and Matron, elected Mr. James Ingram and Mrs. Garden, respectively, by a majority of votes. The former, as elsewhere noticed, had been in service of the Institution for many years; and the latter—appointed to the same arduous and highly responsible duties on 5th April 1825—still continues to discharge them most creditably.

† Addressed to James Leighton, Esq. (Secretary), it was as follows:—"Sir,—I had the honor to receive your letter of the 12th of May, announcing my appointment to the office of Medical Attendant to the Royal Lunatic Asylum, Montrose. In reply, I have only to state that I accept of the situation on the terms communicated in our former correspondence, and hereby bind myself to perform all the duties specified in the printed Code of Regulations, subject to such alterations as may be agreed upon by the Managers at their General or Monthly Meetings.—I am," &c.

The same Meeting allowed to Dr. Mason the sum of £10, "in consideration of his having served one year as Dispensary Surgeon, under the old Regulations, without salary, and that by the new arrangement he is precluded from receiving, in regular rotation, the usual salary of £40." Dr. James Ogilvy and Mr. John Wilson, Surgeon, were also placed on the list of Medical Attendants "for employment when vacancies shall occur;" and three vacancies in the Management having occurred—Drs. William Gibson and David Paterson, with Mr. David Whyte dying nearly at the same time—they were filled up by Messrs. George Crawford and George Gordon, with Dr. Robert Shand. The last-named, becoming Chairman of the House Committee, 9th June, 1835, zealously co-operated with Dr. Browne in effecting the improvements which characterized that gentleman's superintendence.

appointment of a successor, cannot find more suitable record than is given in the Minutes. 6th March 1838: "The Chairman (Provost Crawford) laid before the Meeting the following letter from Dr. Browne, which he had this morning received:—'The Chairman of the Directors of the Asylum:—Sir,—I have to request that you will have the goodness to submit, to the Directors of the Montrose Asylum, my desire to resign my present situation as Medical Superintendent, at the expiry of the current year in June next. I make this communication with great reluctance and regret, as I have long felt, and will always feel, a lively attachment to the Institution—a strong anxiety that the improvements of which it is susceptible should be carried into effect—and deep respect and gratitude towards the Directors for their uniform kindness, liberality, and consideration of the interests of the Establishment, its Inmates, and their Attendants. But a sense of duty to my family has *compelled* me, most *unwillingly*, to adopt the resolution of relinquishing my present engagements. My reason for thus early announcing my intention to the Directors is, that there may be ample time for procuring a successor, or for forming any new arrangements which may seem to them expedient; but, with their permission, I shall continue to discharge the duties of the office until the General Meeting in June, when the Hospital year terminates, and when it is customary to render any account of the results of practice, and of the changes and improvements which have taken place. I beg again to express my feelings of personal esteem for the Directors, and my wishes for the increased prosperity and usefulness of the Institution over which they preside; and I remain, with much respect, your obedient servant.'"—This letter having been read, the Meeting, before accepting of Dr. Browne's resignation, appointed the Provost, Dr. Paterson, Bailie Sim, and Dr. Shand, as a Committee to wait upon that Gentleman, "to express to him the sincere and unfeigned regret of the Managers at the resolution he has adopted of leaving his present charge, and to endeavour to ascertain from him whether he could not yet be induced to continue his valuable services to the Institution for a longer period,"—the Committee being recommended to report the result of their interview to an adjourned Meeting on the 13th current. Accordingly, on that day, the Provost reported "they were very sorry to acquaint the

Managers that, in consequence of the offers made to Dr. Browne, from another quarter, of encouragement to an extent which the funds of this Institution could not offer for his acceptance, the Doctor could not be expected to extend his services here for a longer period; and that, therefore, the Managers would have to take steps for securing to the Institution a Medical Superintendent in his stead.* Having considered this communication, the Managers directed the Secretary to call a General Meeting, on the first Tuesday of April, "for the purpose of adopting measures for supplying the vacancy, defining the duties and fixing the emolument of Dr. Browne's successor, and for other business in connection therewith."

In terms of this resolution, on 3d April next—23 Managers being present—Provost Crawford in the chair—"the Meeting, before proceeding to dispose of the business of the present sederunt, unanimously express their deep and unfeigned regret at the resignation of Dr. Browne as Superintendent of the Institution, the interests of which have prospered so highly while under his charge; and, at the same time, return him their best and warmest thanks for his zealous and valuable services, which have not only been appreciated by the Managers, but also by the relations of Patients and the public at large."

Having thus, in no more than just terms, acknowledged their sentiments regarding one whom they were about to lose, the Managers resolved at this Meeting to advertise immediately for his successor, "to whom shall be confided the Medical Superintendence and Moral treatment of the Lunatic Asylum, the Management of the Dispensary, and Governorship of the Institution, with respect to the internal arrangements of the House—such as having the control of the whole servants, and other in-door management, under the direction of the House Committee; and that his salary for the whole shall be £200 per annum; but he shall not be permitted to practise privately; and, until the New Infirmary is open for the admission of Patients, he shall also have the charge of the present Infirmary as heretofore." Applications from candidates were directed to be lodged

* It was added that Dr. Browne's services in his new charge (meaning the Crichton Institution at Dumfries, then advancing) would not, in all likelihood, be required before the end of the year; and that he would be happy, in the intervening period, to give his best advice and assistance in conducting the affairs of the Establishment—in a word, that the Managers "might fully command his time and attention."

on or before the 15th of May next. The Annual General Meeting, 12th June 1838—36 Managers present—Provost Crawford in the chair—after a Report from Dr. Browne, received another from the House Committtee, which latter made highly honorable mention of that Gentleman. "Your Committee," it said, "cannot refer even incidentally to the improvements which he has introduced into our Institution, without expressing their regret for the loss which has been sustained by his resignation. The enthusiasm, and yet the caution and prudence, with which he entered on the work of improvement four years ago—the untiring zeal and patience with which he has laboured in carrying out his plans—the humane and enlightened system of treatment which he has introduced—and the friendly and affectionate and confiding spirit by which he has secured the attachment and respect of his unfortunate charge—are beyond praise. Much of the good accomplished through his instrumentality may be seen in the aspect of order and cheerfulness and activity which now reigns in the Asylum; but much remains, which is not visible, in desponding hearts, which have been lightened and cheered, and fierce and angry passions which are now at rest." The Report, containing this well-merited and impressive eulogium, was presented by Bailie Sim, Chairman of the House Committee, who, it is very certain, therein expressed sentiments common to the Managers, and all their fellow-townsmen, solicitous for the welfare of an establishment long so creditable to Montrose, and now more than ever distinguished among the Charities of Scotland.

Proceeding, then, to a duty equally painful and imperative, the Meeting had to decide on the merits of candidates for the vacant office; when the Secretary presented testimonials from the following Gentlemen:—1. Dr. Richard Poole of Edinburgh; 2. Maxwell K. Johnston, Surgeon, Glasgow; 3. George L. Smith, M.D., Montrose; 4. Alexander King, Surgeon, Hamilton; 5. James Cowpar, Surgeon, Blairgowrie; 6. H. H. Robertson, M.D., Glasgow; 7. Robert Carnegie, M.D., Dundee; 8. Thomas M'Litchie, M.D., Midcalder; and, 9. J. M. Hamilton, S.N., Stromness. These being considered, the list reduced to three—namely, Dr. Poole, Dr. Smith, and Dr. Johnston—the votes called and marked—nineteen Managers were in favor of Dr. Poole, eight for Dr. Smith, and seven for Dr. Johnston; "whereupon Dr. Poole was declared duly

elected Medical Superintendent of the Asylum, in place of Dr. Browne, for the ensuing three years."

It appears, then, from the preceding narrative, that, however the Managers might differ in opinion as to the extent of aid which Medicine could offer in the treatment of Lunatics, or the precise mode in which it ought to be cultivated under existing circumstances, they invariably secured the attendance of professional gentlemen. The combined nature of the Establishment, indeed, rendered them absolutely essential, as the very existence of an Infirmary or a Dispensary implied means towards the removal or alleviation of disease. But aside from this fact, and though the belief that mental derangement was curable slowly gained countenance from the public, there is sufficient evidence to show that the Patrons of the Asylum would have deemed it radically imperfect, purely as such, if left altogether to the guidance of an inerudite Keeper, be he ever so humane. On the contrary, the sentiments of one individual (Mrs. Carnegie), at an early period, though not instantly and fully acted on, had an affirmative response among them throughout the whole progress of the Institution; and accordingly we have seen them successively, in various ways, and latterly at considerable sacrifice of funds, trivial as the remuneration might seem, obtaining and acknowledging the benefits of labours which had a higher view than the mere controul and security of Patients. At no time, most certainly, did the Directors merit the censure which an official personage (Sir Wm. Rae—see p. 61) justly passed on those who had charge of Private Mad-houses, as despising what was neither employed nor understood; and even the incredulity in which one of their own number indulged, (Footnote, p. 88), though calculated, by its philosophical guise, and an air of authority derived from experience, to impose on conscientious minds, while it grievously annoyed his equally learned and more liberal colleague, seems rapidly to have lost admirers, and never to have gained a single convert. The truth is, in regard to the Healing Art, as in regard to a vastly higher system—with reverence, be it spoken—the infirmities and necessities of mankind, being rarely unaccompanied by some measure of hope, provide a barrier against the universality, or even the predominance, of scepticism; and accordingly the appointment of a permanent Medical Attendant, which, if the Institution had reached a certain magnitude, would have been obligatory

by legislative enactment—at length in advance of popular prejudice—was simply the natural result of opinions and expectations constantly and increasingly operative since the Asylum gave reputation to Montrose.

It is now time to set forth a portion of the services by which they, in whom the Managers thus placed reliance, contributed to the welfare of the Establishment, and at the same time recorded its progress. But, for reasons either already stated or of easy inference, we need not go farther back than the date at which Medical Reports, going beyond merely tabular specification, entered on any and every subject affecting the interests of the charity. The first particular example of this kind was presented to the Managers, at their General Meeting, 13th June, 1826, under the signatures of George Hull, M.D., and David Niddrie, Surgeon, Medical Attendants during the year recently closed; and, as either honestly exposing defects or suggesting remedies, besides communicating information as to occurrences, it is most creditable to these gentlemen. In the following extracts will be found the germs of subsequent improvements:—"It has long been held as an established position, that the number of cures in any Asylum is in a direct ratio to the recency of the attack. It cannot therefore be expected that we can cope with those Establishments where incurables are not admitted, or are removed after a certain period of probation. But it must be highly gratifying to those concerned to find that incurables, likely to be inmates of this House for life, are, with one exception, all happy and comfortable, while to some of them no greater threat is necessary to induce compliance with the wishes of the Keeper than to be told that they must be sent out. No restraint more severe than the strait waistcoat or leather muffs has been found necessary during the last twelvemonths, and even these have been had recourse to in very few instances. The bodily health of the Patients has in general been excellent. (Of three deaths, among 67 Patients, two were cases of old and infirm persons.) Cleanliness, and every means of promoting the comfort of the Patients, have at all times been attended to in the most pointed manner. It is to be regretted that, from the mode in which the House is constructed, it is not possible to render classification so complete as could be wished. It would certainly be desirable to have the more noisy and turbulent Patients removed to some distance from

the rest. Might not this be effected at very little expense, by having a few detached cells at the extremity of the airing grounds?*

* They were built during Dr. Browne's superintendence, but have rarely been had recourse to.

The importance of certain Resolutions, proposed for the improvement of the Institution, by Mr. Henry Westmacott, (brother of the well-known Sculptor), one of the Managers, in a document dated 5th September 1826, and read at a Meeting held on the same day, is such as to justify considerable quotation. It shows that at this period the Asylum was far from perfection. "Since the establishment of the Luuatic Asylum in the year 1779, many others have been erected and are now erecting, with more suitable modern improvements, as regard accommodation, comfort, classification, diet, and treatment. In order to compete with these Asylums, it is desirable that some additions and improvements should be made to the present buildings, which are in many respects absolutely necessary, particularly as regard the comfort of the first class of Patients. The General Infirmary being under the same roof with the Lunatic Asylum is highly objectionable on many accounts; and it is desirable it should be removed to a distance from the present buildings, could an ample fund be raised for separate establishments. In order to separate, as much as is practicable from the limited state of the funds, the Infirmary from the Asylum, it is suggested to extend the present building easterly, by forming wings to the ends north and south, with a connecting building between each for staircases, and for the communication with the main building. By removing the Infirmary, and by converting the upper parts of the building into sleeping and day-rooms for the first class of Patients, the increased number will amply repay the expenses incurred by a rate of board agreeably to their accommodation. There is a great want of comfort for the Lunatic Patients,—not one place being devoted for washing their persons, except a stone trough in the back part of the buildings, without a shelter in the most inclement season,—many of the cells are without sashes,—two of the present cells very objectionable from the confined air,—the airing-grounds, although described as gardens in the Charter, are without a shrub,—the grass-plats and walks neglected, no seats, and but one covered way, which is attached to the first class of Patients' day-room. The present shower-bath is exposed not only to all weathers, by being placed at the back of the building, but when used by the Patients, is highly objectionable, as they are exposed to the gaze of many, and in lucid intervals must feel their degraded state by such exposure. This must apply particularly to the female Patients. It is desirable to give more ventilation to the cells by enlarging the windows, and to furnish warm air stoves. Many of the windows in the sleeping rooms are much too large, the glare of light being too strong; and it is proposed to introduce half shutters on an improved plan. The windows of the second class of male Patients should not overlook the airing ground of the first class, as altercations occasionally occur. The direct communication of the first and second day rooms to each class of Patients, both male and female, should not be allowed, as one class must pass through the room of the other, according to the present arrangement. It will be desirable to enclose the vacant ground on the north and south boundary, and make communications with the vegetable garden." Having been considered, "the Managers agreed to adjourn until Tuesday, the 16th current, when a Meeting will be held, in the Hospital, for the purpose of digesting the Resolutions and Plan, and reporting to a subsequent Monthly Meeting how far Mr. Westmacott's suggestions can with propriety be carried into effect."

19th September following: "The object of the Meeting being stated by the Secretary, Mr. Westmacott at length explained to the Managers the purport of his Resolution, and the extent of the accommodation afforded by the plan, which was laid on the table, and added that for a sum of £2000 the whole (of what he now proposed should be executed) might be carried into effect; and for a further sum of £600, the whole plan would be followed out. Mr. W. further stated that, if the Managers entertained his Resolutions favorably, he would willingly devote his time to furnish specifications, superinted the erection of the whole buildings, and see that they were executed in a proper and

"Since divine service began to be performed amongst the Patients once a fortnight, we cannot say that we have ob-

substantial manner." "The Meeting, having fully deliberated upon the whole subject, &c. Provost Jameson moved that this Meeting recommend the Resolutions and Plan proposed by Mr. Westmacott to the favorable consideration of a General Meeting, to be called for that purpose; and that the plan in the meantime lie for the inspection of the Managers," &c. The motion was carried unanimously.

3d October next: The Secretary having informed this General Meeting, &c., and that Mr. Westmacott, "at the suggestion of the Preses, submitted his Resolution and Plan, and stated, that, to obviate objections which had been urged, he had now made some alterations thereon, which would occasion an additional expense of £600, making £3000 in whole; but these alterations would afford much more accommodation for the Sick and Lunatic Patients. And the matter having been fully considered and digested, it was moved by Mr. Burnes that Mr. W.'s suggestions for the improvements of the Asylum be forthwith adopted; which was unanimously agreed to. Mr. Burnes further moved that, with the view of carrying the most essential and necessary improvements into effect, Mr. W. be requested to prepare a plan, the expense of executing which shall not exceed £2600 in the first instance; which motion, being seconded, &c., was carried by a majority. It was then resolved that Mr. W. shall prepare his plan to be submitted on the day of next Monthly Meeting; and this General Meeting agree to adjourn until that day," &c.

7th November following: "Mr. Westmacott, in terms of the appointment, &c., submitted a plan, the expense of which would not, in his opinion, exceed £2600, for carrying into execution the improvement and additions which he suggested to the buildings of the Asylum; but he observed that part of his plan might not at present be carried forward, particularly the extension of the cells in front of the Asylum, as the money to be employed in that erection could with greater propriety be laid out in improving the present building, and adding to the comfort of the Patients therein, by lining the cells with wood, and placing two stoves in the house for heating the building, leaving the extension of the cells in front to a future period, when the funds of the Institution shall enable the Managers to carry them more easily forward. Mr. Ogilvy then moved that the plan, &c., be adopted. Mr. Brewster seconded. Dr. Paterson (clergyman) moved an amendment 'that the adoption, &c., be delayed, and that the improvements on the interior of the present building be forthwith carried into effect.' This was seconded by Mr. Mudie. The former was carried by a majority, and, accordingly, a Committee was appointed to procure working-drawings, &c. &c., 'and if the estimates shall not exceed the sum of £2600, already voted for the execution of the work,' with power to carry the improvement into execution. Mr. Westmacott was named Convener. 'The Meeting suggest to the Committee to delay the extension of the north and south wings in front, as recommended by Mr. W., and to appropriate the money which would be required for that purpose in improving the interior of the present buildings, by lining the cells, paving where necessary, and procuring heated-air stoves.'"

At the Meeting of 5th December following, two Managers were appointed to the above-mentioned Committee, in room of other two who declined to act; and it was agreed to direct "an account of all the money expended in the shape of improvements and repairs by order of the House Committee, from the General Meeting in June last to the 1st December," should be laid before the Managers next Monthly Meeting—which it was accordingly. At the Meeting of 6th February 1827, doubts having arisen "how far the Managers, at their ordinary Meeting, could appoint members of a Committee named at a General Meeting, as had been done (see above), resolve that a General Meeting shall be called, for the purpose of nominating two members of the Committee on Mr. W.'s plans," &c. Accordingly, on 19th February, the Secretary stated the object, &c.; but, "before proceeding, &c., Dr. David Paterson tendered a protest against the plans, &c., and the consequent expenses to the Institution—which protest, on the motion of the Rev. Dr. Smith, seconded by Mr. Barclay, was not received,—a great majority having voted for its being withdrawn." The

served any very material improvement attributable to the arrangement, neither can we say that any bad effects have resulted from it. Upon the whole, however, it must be remarked that the Patients in general behave with astonishing propriety. But the trial has been too short to ground any decided opinion on as to its influence. We therefore recommend it to be continued till farther experience shall decide as to its effects. That it serves as a source of employment, both during the time thus occupied, and for some before and after it, admits of no doubt; and any one may satisfy himself of the attention the Patients in general pay, by inquiring the words of the text and tenor of the discourse, which in most cases will be readily and correctly answered. The very preparation made for its celebration, and the bringing together of all the classes at those times, afford a pleasing variety to the monotony of their lives. Another and still more important benefit has been derived from it—namely, to those sick Patients whose ailments deprived them of the opportunity of attending their own churches, and to the servants who have not an opportunity of attending every day at church.*

Meeting then adjourned, filling up the vacancies, to the Monthly Meeting 6th March, when, however, "The Secretary, at the request of Mr. Henry Westmacott (not present), laid before the Meeting a letter addressed to the Managers, resigning his situation as a Manager of the Institution;" and "thereafter, the Meeting taking into consideration the object for which the same was called, &c., and the subject having undergone discussion, &c., it was carried that for the present the filling up the Committee be delayed; but the Meeting, understanding that there are several improvements going forward at the Asylum, in the interior of the building, name, &c. &c., together with the House Committee, to superintend the execution of these, as the work cannot now be delayed."

Thus, a magnificent, and, in all probability, judicious project, was set aside, and, in place of it, some minor, but absolutely necessary changes and additions were agreed to, not without division, at the Annual Meeting, 12th June 1827.

* The measures towards introducing religious services at the Asylum deserve particular notice.

5th April, 1816: "Mr. George Paton moved that the Managers should invite the Established and Dissenting Clergymen in this town to visit occasionally the Patients in the Sickward of the Hospital—of which motion this Meeting unanimously approves, and directs extracts to be sent to the Clergymen." It is to be inferred, from the special nature of the Minute, that Lunatics were not comprehended; but, should doubts be entertained on the subject, they will give way to the next entry respecting it.

4th November, 1817: "There was produced a letter from Lord Robert Seymour, M.P., of which the tenor follows:—'London, 29th October, 1817: Sir, —I beg leave to inform you that a Committee of the Governors of the Hospital of Bethlem, lately erected in the environs of the City of London, having at this time under their consideration the expediency of providing religious instruction for such of the Patients as are capable of receiving it, and also for the officers and servants of the Establishment, I have been requested, as the Chairman of such Committee, to beg the favor of your informing me, whether, in the Institution which is under your care, any instruction of a religious nature is provided for the convalescent Patients, and, in that case, of what description is the instruc-

"The Medical Attendants cannot avoid remarking that a want of employment and the tediousness of idleness are

tion so afforded, and what results appear to you to have been produced by it. Your reply to this communication will be considered a very particular favor. —I have the honour to be,' &c. (Addressed, 'The Governor or Superintendent of the Establishment for the Insane at Montrose.') The Meeting direct an answer to be written, that no religious instruction has hitherto been offered to the Lunatic Patients of the Hospital, but that the servants belonging to the Institution are in the habit of regularly attending divine service; and a recommendation was sometime ago made by the Managers to the Clergymen of the town and neighbourhood to visit the Hospital, to which they have attended."

1st March, 1835: "A verbal Report having been made, about two months ago, to the House Committee to report on the propriety of instituting divine worship in the House, and Mr. Ogilvy having reported that it was the opinion of that Committee that the experiment should be tried, and that there were from 20 to 24 Patients in the Asylum who might, with a reasonable prospect of beneficial results, attend divine service, the meeting remit to the House Committee, to which they add all the Clergymen connected with the Institution, and the Rev. Messrs. Wilson and King (both Dissenters), of Montrose, to take the proper measures for having divine worship celebrated in the most convenient and proper manner; and the meeting authorize that Commitee to have a proper desk or pulpit erected for the officiating Clergyman, and to incur any other expense that a trial of the proposed measure may render necessary, and direct the House Committee to report to the General Meeting in June next." Accordingly, it is said—"The necessary arrangements for having divine worship performed in the Asylum were completed immediately on the remit, and divine service has been celebrated twice; but it will require to be more frequently done before any report can be made as to its beneficial effects." And, on same day: "Referring to that paragraph, &c., Mr. Brewster moved that a Chaplain be permanently appointed to the Institution, under such regulations, and with such allowances, as the present or any future Meeting shall fix." The motion was seconded by Mr. Smart. "Dr. Gibson moved as an amendment, that, as the House Committee have not recommended the measure proposed, but stated that it will require more experience in the celebration of divine worship than has been hitherto had before any report can be made upon the subject, that the consideration of the propriety of appointing a Chaplain be delayed to the Annual General Meeting of next year, at which time the Managers will be put in possession of a Report on the subject from the officiating Clergy, House Committee, and Medical Attendants now to be appointed." This amendment, seconded by Dr. David Paterson, was carried by a great majority; "but the Meeting express their hope that the Clergymen connected with the Institution will perform divine service in turn in the Hospital for next year, and remit to the House Committee to correspond with the Clergy on the subject,"—the Rev. Messrs. King and Wilson being adjoined "for the performance of that duty."

1st November, 1825: Dr. Paterson, on the part of the House Committee, stated that they had attended to the matters remitted to their consideration with regard to divine service, &c. 13th June, 1826—(Annual General Meeting): "The Rev. Robert Smith, from the Committee of Clergymen for conducting the celebration of public worship, gave in the following Report:—'6th June, 1826: At an Adjourned Meeting of the Committee, held to-day—present, Rev. Mr. Smith, Dr. Paterson, Mr. Brewster, Mr. Barclay, and Mr. Fergusson (Mr. Smith continued Preses, and Mr. Fergusson Clerk)—they resumed the consideration of their former Meeting; and, having heard the Report of the Medical Attendants read, and having also considered the evidence given at last Meeting by Mr. Ingram (Keeper), and Mrs. Gardyne (Matron), they unanimously resolved that the following Report should be given in to the General Meeting:—'That divine service has been regularly performed once a fortnight in the Hospital since the day of October last; that the conduct of such of the Lunatics as were present was in general remarkably decent and composed; that the Committee are informed that many of them have talked afterwards of what they have heard, and are anxious to know

constant complaints among the Patients, especially the males, even of several of those whose cases are the most hopeless. They would therefore beg leave to suggest the consideration of some means of occupation and amusement suited to their different tastes and abilities of enjoyment. During the winter season, this complaint was most frequently made, and packs of cards were given, with which they seemed highly delighted. The Medical Attendants do not, however, consider cards by any means the most

when they are to hear sermon again; that although the Committee are fully aware that the experiment has as yet been but very imperfectly made, they are fully convinced of the propriety of continuing divine service in the Hospital, and unanimously recommend to the General Meeting to appoint its continuance in such a way as they may deem most likely to be beneficial to the Patients.'"

The opinion of the Medical Attendants, given at the same Meeting, as will be seen from the text, was a very cautious one, and looked rather to the future than to the past for a decision on the subject, which will be resumed in the subsequent Reports. Meanwhile, perhaps, it may not be indelicate to prove that, in regard to a matter, every way, and whatever its effects, of the highest importance, Montrose preceded some, at least, of the Lunatic Asylums in Scotland. Thus, for example, while religious service was fairly and deliberately undergoing observation at the former in 1825, we find the General Report of the Lunatic Department of the Charity Workhouse of Edinburgh for the year 1828 speaking as follows:—"That, at the suggestion of (the Rev.) Dr. Brunton, a trial of public worship was commenced in October, and has been continued since, on the Lord's Day, with very satisfactory results." —Again, and still more lately, in regard to the Dundee Asylum, we learn "there is one subject which peculiarly belongs to the Report of this year, (namely, ending with May 1831), and to which the Directors refer with much satisfaction—the introduction of public worship into the Asylum. Of the propriety of this measure, the Directors have been convinced, and have expressed their wishes in regard to it in former Reports, and more particularly in the Report of last year. In the original building there was not a room of sufficient dimensions to contain any number of the Patients, along with the servants of the Establishment; so that a period of delay in carrying this measure into effect became unavoidable. This desideratum, however, has at length been supplied; and the Ministers of the Established Church in Dundee having kindly offered to officiate alternately in the forenoon of the Lord's Day, public worship commenced on the 7th of August, in a room temporally fitted up—66 of the Patients being present, 8 of the Servants, the Matron and Superintendent, the Physician, Secretary, and four of the Directors."

Happily, as respects the Asylum at Montrose, one of its halls afforded space enough for the whole inmates to meet in solemm assembly as children, however varied in helplessness and wants, of a common father, "from whom cometh every good and perfect gift."

It only remains to be mentioned here that, on the last day stated in the text, "the thanks of the meeting were voted to the Clergymen who had undertaken the trouble (by the way a most awkward expression) of celebrating public worship, and who have favored the Managers with so satisfactory a Report; and the Meeting request these gentlemen will continue their labours,"—after which Mr. Brewster having moved "that a Clergyman be appointed to celebrate Divine worship in the Hospital for one year, with a suitable salary, that he shall preach every week, and be in the House to converse with the Patients once a day, by way of experiment"—a motion seconded by Mr. George Paton,—Mr. Mudie moved as an amendment that, "although satisfied of the beneficial effects resulting from the celebration of divine worship, the Meeting delay the appointment of any Chaplain with a salary, or for any period, but request the Clergymen who have hitherto officiated to continue their labours." This amendment was carried.

proper amusement, but made the experiment with a view of observing how far the attention of the different Patients could be withdrawn from their particular trains of thought. There is one mode of occupying Lunatics which, in several similar Establishments, is employed with success—namely, having a space of ground allotted in proportions to such of the Patients as would take an interest in attending to it. Such also as are of trades ought to be employed in something as nearly allied to their former avocations as could be done with safety." *

12th June 1827 : Medical Report, signed John Carr, Surgeon, M. Campbell, Surgeon. After expressing satisfaction at the number of recoveries effected—a circumstance which ought to counteract an impression of an unfavorable kind, more especially as the Asylum was a retreat for incurable no less than curable Patients—and stating that the fair way of judging is by comparison between the number of recent cases admitted and the number dismissed —these Gentlemen remark :—" It is needless to enlarge on the absurdity of attempting means of cure, in cases hopeless from long standing or hereditary taint; and no honest practitioner will ever think of flattering friends, or tormenting such Patients, by efforts both delusive and irrational. All that can be done is, to take care of the bodily health of the sufferers, and provide for their comfort and safety—in which respects, the Medical Attendants can safely assert that every attention has been paid." Alluding to two subjects, on which, it seems, much had of late been said, the Attendants, having been in a situation which afforded the best means of judging, and being "in no degree personally interested in upholding the present system if bad," proceed as follows :—" With regard to accommodation, they have no hesitation in affirming that, since the late alterations in the lower or ground cells, there is as much comfort as is consistent with security; the rooms are clean and well-aired; and, as they are never occupied but during the hours of sleep, they are sufficiently large. With regard to diet, that is varied during the week as much as is practicable among so great a number. Some such system as is pursued in this respect prevails, and

* Very reasonable as this suggestion may seem to be, it is not invariably correct, even where its application is easy; and, on the contrary, an employment totally dissimilar to the wonted is sometimes much preferable, with a view both to break off old, perhaps painful or injurious, associations, and to generate others salutary as well as new.

must prevail, in every institution of the kind: to consult individual taste would be impossible; and the best answer to any objection to the regimen is, that the Patients relish their food—are, without exception, healthy and satisfied: when sickness occurs, such change is made as is suitable; and the wishes of the Patient, when prudent, are always consulted." A desideratum is then pointed out—namely, additional airing grounds and day-rooms for the most violent Patients of both sexes; and, again, the want of thorough employment is regretted. "Many difficulties," it is said, "occur certainly in making any attempt of this kind: some of the Patients are in such a state of apathy, that neither force nor solicitation could induce them to work at anything; and others it would be imprudent to trust with any kind of tools. Still, something might be done; and the Medical Attendants recommend that inquiries be immediately made regarding the plan pursued at institutions where the employment of Lunatics is attempted." As to the performance of Divine Worship, they briefly observe that it "has appeared to them to have proved neither beneficial nor injurious;" and they conclude with noticing the crowded state of the Asylum during great part of the year—to obviate or prevent the recurrence of which, they recommend "the adoption of some plan, which will admit of being immediately put in execution, for extending and increasing the accommodation."*

10th June 1828: Medical Report signed by David Paterson, M.D., James Wills, Surgeon. Part of this, the reader will observe, was quoted in the narrative of proceedings towards the appointment of a permanent Medical Attendant—a measure which it advocated on very strong grounds. Much of the remainder, as will be seen, is equally energetic—if not vehement—more especially on one point, which, above every thing, ought to have been approached with delicacy, and indeed the highest awe. Coming, then,

* At this General Meeting, as at that of the preceding year, Mr. Brewster moved the appointment of a Chaplain, &c., was seconded by Mr. Geo. Paton, and met with an amendment from Mr. Mudie—all in precisely the same terms as those quoted in last foot note. He experienced, however, a different issue—his motion being carried by a majority of 14 to 11. "Thereafter, Mr. Aberdein moved that this Meeting remit to a Committee of all the Reverend Gentlemen who are Managers to select a proper person to perform the duties of Chaplain, with a salary not exceeding £25 a-year." This was seconded by Mr. John Paton, and carried,—Mr. Brewster being named Convener of the Committee. At this Meeting, a vacancy having occurred in the management by the death of Peter Arkley, Esq., the Hon. William Maule of Panmure (now Lord Panmure) was elected in his room.

to the second topic of which the Report treats—the first being reviewed elsewhere (page 91)—we have the following remarks:—"In this (meaning Classification), our Asylum is extremely deficient,—there being only four sitting-rooms and four airing grounds; whereas there ought at least to be twelve of each, viz.:

1. Genteel Females,	furious.	Convalescent,	9.
2. Do. do.	mild.		
3. Common do.	furious.	Convalescent,	10.
4. Do. do.	mild.		
5. Genteel Males,	furious.	Convalescent,	11.
6. Do. do.	mild.		
7. Common do.	furious.	Convalescent,	12.
8. Do. do.	mild.		

—And, to render the plan of Classification more complete, the sitting-rooms, if they happen to be between different airing-grounds, ought not to have cross lights, nor internal doors of communication, as ours have; but each sitting-room ought to have its doors and windows only on that side next to its own airing ground. Recreation and air are points well worthy of notice. In these respects, the Montrose Asylum is susceptible of no small improvement. When out of bed, the whole of the insane ought, according to their different states, to be kept in some one employment or other—such as labour or walking, without or within doors, according to the weather—or reading various books, newspapers, and other periodical publications, according to the taste of the reader—or innocent games, writing, drawing, and music; and, towards fulfilling this part of the plan, we take the liberty of strongly recommending a suitable library within the Asylum."

"We now come to a very serious subject indeed. It is no less than that of Divine service as it has been performed to the Lunatics in our Asylum for now rather more than two years. On this momentous subject, then, we are, in charity, in truth, and in duty, compelled to declare our sentiments freely and fearlessly, by stating that preaching and praying to the Lunatics, in the manner hitherto practised, have been of no avail—have proved worse than useless—have, in fact, proved detrimental; and that, consequently, as well as to avoid unnecessary and mischievous expense, the plan ought to be relinquished, and the Chaplain discharged; and, let it be remarked, what we have here briefly advanced on this heart-rending subject, corres-

ponds with the sentiments of the Keeper and Matron of the Institution. But that is not all. In spite of the obloquy that may be poured out against us, we hesitate not further to declare our sentiments, by adding that such a practice as the one in question is contrary to reason, as well as to experience, and seriously cannot be called better than a profanation of the Eternal Truth—that is, of God's most holy Word."*

The next theme touched on brought out more agreeable language, though not a little hyperbole. "We cannot refrain from stating that latterly we have tried the power of music on the Patients, and that, in a general sense, we have found it productive of the most happy effects, —operating like magic, and inspiring almost all, more especially the females, to a greater or less degree, with happiness,—making some to trip it 'on the light fantastic toe'—others, from seventy to ninety years of age, to rise from their seats, and, standing, to move their feeble frames in time to the enchanting melody,—and others sitting to listen and to gaze with wondrous delight. Having thus far witnessed the powerful and delightful effects of sweet sounds on the Patients congregated, we are prompted humbly to suggest the propriety of making trial of a musician, two hours, more or less as circumstances may point out, twice or thrice a-week, for one year, with a view of benefitting the Lunatics—the musicians to be under the direction of the Medical Attendants, the Keeper, or the Matron, and to be employed by them, according to the best of their judgment, so as to fulfil, as far as possible, the intended purpose. As a further improvement, we may observe that the apartments of the Lunatics ought to be rendered comfortable in the winter time, by means of heated air, as far as it may be found practicable. Lastly, two bathing-rooms, one in each front wing, for the warm or cold bath, would, in our opinion, constitute another very considerable improvement, whether as to convenience, comfort, or utility."†

* On 4th September preceding, the Rev. Mr. Brewster, Convener of the Committee formerly appointed, &c., reported "that it was proposed and agreed to that the Rev. Mr. Andrew Wilson, Minister of the First United Secession Church in Montrose, should be appointed for the space of one year from this date,—the Committee having, notwithstanding of several attempts, failed in obtaining one of the Established Church." The Meeting remitted to Mr. Brewster to confer with Mr. Wilson as to accepting, &c.

† The last portion of this very comprehensive Report, relative especially to the Dispensary, was given formerly—(page 91). The Managers, having re-

9th June 1829: Medical Report, signed Wm. Gibson, M.D., George Hull, M.D.—"The Medical Attendants

ceived it, unanimously voted thanks to the Medical Gentlemen who drew it up "for their attention, &c., for the bygone year;" but, of course, this did not imply concurrence in every particular; as, on the contrary, the following entry shows:—"The Meeting, understanding that the appointment of Mr. Wilson as a clergyman to the Asylum ceases in September next, it was moved and carried that his services be continued at the same rate of salary until the General Meeting in June, 1829." Farther, on the motion of Mr. Charles Barclay, a Committee—he being Chairman—was instructed to consider and deliver (at next Annual Meeting) their opinions on the suggestions contained in the Report.

Very soon after the date of this Meeting, it may be noticed, the Legislature passed a new Act (amending a former) for regulating Madhouses in Scotland. The Sheriff (Mr. L'Amy), referring to it in a letter addressed to the Keeper (29th July), observed—"You will find various provisions which fall to be attended to by you. In particular, it is provided that no insane person shall be received into any public Hospital, or any public Lunatic Asylum, without a warrant from the Sheriff, such as is required by the said recited Act (the previous) in the case of a Private Madhouse. Provision is also made for the mode in which Houses, for the reception of insane persons, shall be visited by Medical men, and for *Registers* to be kept, to be exhibited to the Inspectors mentioned in the Act. For further particulars, I must refer to the two acts themselves, which, it is provided, shall be construed together; and I have to request that you will give immediate attention to what is contained in those two statutes, in so far as regards the Public Hospital or Lunatic Asylum of which you are the Keeper. The public Hospitals will now be visited twice a-year by the Sheriff—in spring and autumn—beginning with the present season, when the Register required by the act will be called for."

Again, addressing the Provost of Montrose, as Chairman of the Managers, who had written to him respecting a matter of some practical importance connected with the above-named Act, Mr. L'Amy said—"I delayed answering till I should look into the Madhouse Act, and, if possible, have some conversation with the Lord Advocate, the Member who brought the Bill into Parliament. But his Lordship is at present from home. There can be no doubt that my Substitute at Forfar has the power of granting warrants for the reception of insane persons into the Asylum. He possessed that power under the former Act, in regard to Private Madhouses—55 Geo. III., c. 69, § 8—which is still in force, and to which reference is made in section 5 of the new Act; and therefore I may appoint in Montrose; and, as you state strongly the inconvenience that might on some occasions arise, were it required to send to Forfar in every instance for the requisite warrant, I am inclined to name some proper person in Montrose or its neighbourhood for that particular duty, so as to facilitate the admission of Patients into the Hospital, and to whom, in cases of emergency, application may be made, though it will be more regular in general to apply to Forfar. You may therefore send me a list of the names of such persons as the Managers recommend as fit, and as may be willing to act, that I may select one of them, and send him the necessary commission and instructions." Eventually, Mr. James Burnes undertook, and was authorized to perform the duty.

As to another point in the Sheriff's letter to the Keeper, a *memorandum*, prefacing the first of the Registers directed by the same Act, may be quoted:—"Before entering on the weekly Register of Patients in the Montrose Lunatic Asylum, agreeable to the Act of Parliament 9, Geo. IV., c. 34, it may be proper to state that since 1817 a regular Register of all the Patients admitted into and discharged from this house [*has been kept*—obviously meant, though the words be omitted], with a history of the rise and progress of their different cases of insanity, as far as could be ascertained from their friends before admission; and also an account of the general treatment and termination of the cases while they remained in it. This book is still continued, and is at all times ready to be produced when called for. The treatment of the Patients in this Asylum has always been conducted on the most humane system. The

feel disinclined to touch on those topics reported on so much at large last year,—being at present under the consideration of a Committee whose opinion will be laid before the Managers. The Patients in general have enjoyed excellent bodily health, and very little restraint has been found necessary. The state of the House has been good, and highly approved of by the Sheriffs. Every means of promoting health and comfort have been most carefully attended to. Indeed, such is the improved appearance of the House generally, that the Medical Attendants feel themselves called upon to congratulate the Managers that this is invariably a subject of remark by all those who have visited the House lately, and had formerly an opportunity of seeing it. They would beg leave to suggest the expediency of having a room or two, suitable for the better class of Patients, at all times ready for the reception of that class, instead of having the furniture to prepare after their arrival, as has been the case recently. It is always desirable that Patients should discover as little difference as possible in the style of their sleeping apartments to what they have been accustomed. As additional day-rooms for convalescents are very much wanted, and it being in contemplation to build a new one for the ladies, the Medical Attendants would suggest whether it would not be more advisable, under the present state of the funds, to defer erecting any new buildings for that purpose until circumstances shall admit of separating the Infirmary altogether from the Asylum, and to convert the rooms occupied as the large sick-wards into day-rooms. These rooms are admirably calculated for that purpose, having delightful views both of the sea and land. The expense of erecting two day-rooms would go far in building a separate erection in some contiguous situation to serve as an Infirmary. The remainder of what would be necessary might possibly be obtained by subscriptions from individuals and collections from parishes. The reasons for removing the Infirmary

only restraint ever employed is solitary confinement, and the use of muffs, generally with leather straps, but in a few cases iron links have been found absolutely necessary."

There need, however, be no scruple in saying that, according to indubitable testimony, *chains*, of *sufficient strength*, we may be sure, were formerly in use at Montrose, as well as elsewhere generally; while the Keepers, in addition, or by way of substitute, employed *whips*—possibly less flexible agents—to ensure obedience. The public is solemnly assured that, on the ground of policy alone, supposing humanity out of the question, a treatment, the very reverse of what these means denote, is incomparably to be preferred.

from its present position are many—some of them very urgent. 1. The greater proportion of the Patients (Infirmary) are surgical cases, as of sore legs, &c., which disable them from taking journeys down and up three long flights of stairs—so that, once into the Sick-Wards, they are entirely excluded from the benefit of air and exercise, so long as they remain inmates of the house. 2. A great proportion of the sick and convalescent Patients are deprived of the same beneficial means of recovery, from the same cause. 3. The circumstance of the windows of the Sick-Wards overlooking the airing grounds of the Lunatics, in many cases, tends very much to aggravate such nervous diseases as are under cure. 4. It is within the knowledge of the Medical Attendants that this very circumstance prevents many Patients from coming to the Infirmary, especially such as can afford to pay well, and consequently limits the benefits of the Charity; and, in many instances, sick Patients have left the house in consequence of witnessing the Lunatics in the airing grounds before their health was sufficiently re-established. And, above all, notwithstanding the utmost vigilance and care, there is danger of contagious diseases being admitted or breaking out among the sick, and being propagated from the Patients in the Infirmary to those in the Lunatic Asylum." *

8th June 1830: Medical Report, signed M. Campbell, Surgeon—D. Niddrie, Surgeon. After stating the cases which had occurred, &c., these Gentlemen express their trust that the Managers, "when they take into consideration the difficulties to be encountered in treating a disease often as obscure in its causes as it is dreadful in its appearances, will be satisfied that proper attention has been paid

* "Many other cogent reasons," it is said, "might be adduced, but the above are very claimant," and so they were deemed by the Managers, who took measures accordingly.

Part of the Report of the Committee mentioned in the last note has been given at page 92. The remainder is brief:—"The Committee highly approve of the suggestions as to the moral treatment and amusement of the Lunatic Patients, and would earnestly press the subject upon the attention of the Managers. With respect to the recommendation to dispense with the services of the Chaplain, the Committee must decline expressing any opinion." In regard to additional sitting-rooms, classification, warming by heated air, &c., "The Committee are of opinion they should be attended to as soon as the state of the funds will permit." The Meeting recommended these matters to the consideration of the next Medical Attendants, and directed the House Committee "to make such addition to the books belonging to the Institution as they shall judge proper for the amusement of the Patients." At the same time, Mr. Wilson was again appointed Chaplain, "for the purpose of prayer and exhortation," with a salary of £15—a motion to this effect having been "carried unanimously."

to the unfortunate Patients, and that Medical treatment, so far as it could be availing, has not been neglected." "With regard to accommodation," the Report afterwards proceeds, "the Medical Attendants have to remark that a great increase of comfort has resulted from the additional sitting-room for the female class of Patients: the quiet have been placed by themselves, and removed from the noisy, who constantly operated as a cause of irritation to the others. Since this plan, however, has been carried into effect, the charge of all the Patients in two sitting-rooms, communicating with one another, has devolved on one Nurse, whom the Medical Attendants scarcely consider capable of affording the necessary attendance, as it is impossible, from the arrangements, that the Patients of both rooms can be under her eye at once. Several have employment, by being indulged in writing, drawing, sewing, knitting, &c. Should the Managers resolve on having an additional Keeper, in the event of a third sitting-room being added for the male Patients, it would allow of one or two of the quietest of this class occasionally making short excursions from the Asylum, which would be a source of pleasure to a few who could be sensible of the change, and who might be trusted, in such circumstances, with safety, when accompanied by a Keeper. With respect to religious instruction, which has been attempted, the Medical Attendants cannot, either from their own observation or the reports which they have received from the Keeper and Matron, speak favorably. Indeed, it is scarcely to be expected that any address or religious exercise could be so managed as to avoid touching some point or other, regarding which not a few of the Insane are peculiarly sensitive; and it is respectfully suggested that the intercourse of the Clergyman with the Patients should be left to the control of the Medical Attendants, who, from their own remark, or the reports of the Keeper and Matron, would judge of such cases as were likely to be benefitted by religious conversation. As to music, it seems to affect the Patients less than might have been expected. However, as it is a source of pleasure to a few, and the expense of procuring it is trifling, the Medical Attendants would suggest that it be continued." The Report very correctly says that, "as the previous history of a case is of the greatest consequence, in judging not only of the proper treatment to be pursued, but also of the probability of cure, it is requested that the Managers

would cause the rule in this particular to be strictly enforced."*

14th June 1831: The Medical Report, signed by D. Niddrie alone, as before noticed—Dr. Carr having died—relates purely to the ordinary details.†

12th June 1832: Medical Report, signed George Hull, M.D.—Will. Gibson jun., Surgeon. In addition to usual matter, these Gentlemen treated of "one or two subjects which have been noticed in former Reports, but to which no attention has been hitherto paid." "Of these," say they, "there is one which they consider of the most vital importance to the character and prosperity of this Institution—namely, the gradual accumulation of old incurable cases. This is increasing so rapidly, that there is every prospect of this Asylum becoming a depot for that class solely, and that in no long time. In every Asylum of old standing, this accumulation must take place in a greater or less degree, where there is no provision for their otherwise being disposed of. But here they are attracted as it were by the low rates of board, and there being no limit to the duration of such Patients continuing in the house. More recent institutions, profiting by the experience of older establishments, have provided for the removal of such Patients after a certain standing, and do not admit such as afford no prospect of being benefitted by their admission. So that the consequence will be, in a short time, that Montrose will be saddled, not only with a house filled with incurable Lunatics, but those of the very lowest class. The Medical Attendants regret to add that they have reason to believe an impression of this being already the case has got abroad, greatly to the prejudice of this Establishment. The next subject, though perhaps less detrimental to the reputation of the Institution, is not of less consequence to the few curables we have room to admit—namely, Classification, in which there are few, if any, receptacles for Lunatics in modern times so deficient as that of Montrose; and it must be evident to all, that, unless we keep up with other establishments in this par-

* The Report was remitted to the House Committee. In addition to its contents, the Medical Attendants verbally stated that it would be highly beneficial to heat the lower part with stoves, or otherwise, during the winter months.

Mr. Wilson was again appointed Chaplain, with the same salary, "for the purpose of prayer and exhortation with such of the Patients as the Medical Attendants should consider (likely) to derive benefit therefrom."

† Mr. Wilson again appointed "for the performance of the same duties."

ticular, as well as every other, Patients who can afford to pay a high rate of board will never be sent here. It has been uniformly remarked by those who visit this Asylum, that, although considerable sums of money have at different times been laid out in increasing the accommodation and comfort of the Patients, there have been no arrangements made for any additional classification—that the Convalescents are still subjected to the constant annoyance and disturbance of their furious and mischievous neighbours, than which nothing tends so much to prevent recovery or induce relapse. Want of occupation is another very claimant evil, which requires immediate alteration. Let any man, suffering no bodily ailment, suppose himself confined to his room and a small space of garden, and off from the view of any external object, similar to our airing ground, deprived of all employment or recreation—what would be his feelings? Added to which, present constantly to his view the horrid spectacle of persons deprived of reason, with whom he can hold no intercourse, and whom he can only look on with pity: would such a situation not be much more likely to drive a sane person mad than to recover such as are either labouring under delusions, or in a state of convalescence from positive mental alienation? A number of the Patients do no doubt occasionally walk in the garden, and from the Mount have a view of the sea and surrounding country; but these visits are so formal, and attended with so much constraint, that very few of the Patients are anxious to avail themselves of such opportunities. Numerous plans for the purpose of obviating these very serious defects have been proposed and carried into execution, with the happiest effect, in various establishments for the reception and cure of Lunatics, both public and private. Several of these have at different times been recommended in the Medical Reports; and, should the Managers deem it expedient to appoint a Committee to take these subjects into consideration, the authors of these remarks are confident that such a Committee would meet with the cordial co-operation of all the Medical Gentlemen connected with the establishment."*

* Mr. Wilson was appointed as before.

At this Meeting, a Report from a Committee on the subject reported as to the propriety of separating the Infirmary and Dispensary from the Asylum as soon as the funds of the Institution and other circumstances would permit; and, as elsewhere shewn, another reported the comparisons which had been made between the Establishments at Montrose, Aberdeen, Dundee, &c.

11th June 1833: Medical Report, signed M. Campbell, Surgeon—D. Niddrie, Surgeon.—"The many improvements which the Managers have humanely and kindly carried into effect, during the last few years, leave the Medical Attendants little to suggest on this head, as they know of no comfort the unfortunate Lunatic is capable of enjoying that he is deprived of. They would beg, however, to mention that, in their opinion, it might be a source of pleasure to a few of the Patients at least, if they could occasionally have a view of the distant surrounding scenery from their airing ground. The means of effecting this object they would respectfully leave to the better judgment of the Managers or a Committee; but they would be happy to give every assistance which any advice or opinion of theirs might afford. They would again request the Managers to enforce the Regulation which enjoins those sending Patients to transmit distinctly written statements of their cases along with them, as they are at this moment much in the dark regarding several Patients, both as to the duration of the disease and its apparently exciting cause. They would also respectfully suggest the strict enforcement of the Rule which excludes strangers from viewing the insane Patients. In some cases, the sight of a stranger produces distressing excitement; and to the relations, should they know, it must be a source of much pain to think that those they are interested in, and who are labouring under the most dreadful of all human maladies, should be made the objects of idle and, it may be, unfeeling curiosity. They would, with submission, recommend that some public notice to this effect be ordered, as it would prevent applications which it is sometimes difficult to decline."*

* After observations on the Dispensary, &c., not here required, the Report concludes with expressing entire approbation of the manner in which the Keeper and Matron had discharged their respective duties. The Managers recommended the House Committee to carry into effect the above suggestions, "as to providing a platform in the airing ground, to enable the Patients to view the surrounding country, under direction of the Managers, at any Monthly Meeting." Mr. Wilson was re-appointed as before.

In the course of the following year, the House Committee was authorized to take measures for introducing gas-lights into the Asylum. But the year passed without them, and accordingly the next House Committee, in conjunction with Dr. Browne, got new instructions and *the means* towards that purpose.

In reference to part of the above Report, and in justice to the Managers, it must be proved that they always consulted the feelings of the Patients and a sense of propriety by measures for the prevention of injurious visits. Thus, so early as 5th May 1783, "The Meeting recommend to Provost Glegg to intimate to James Booth, Keeper, to use his endeavours to prevent idle and improper persons (especially on the Sunday evenings) from entering the

10th June 1834: Medical Report, signed D. Duncan, D. Whyte, and being the last under the system of rotation, which terminated on the appointment of Dr. Browne. It notices the satisfactory proportion between the cures and admissions in the Asylum; while the number of deaths, chiefly among old and feeble persons, is stated to have been above the average in the establishment; the occurrence of many serious cases of disease in the Infirmary; one particular in regard to the Dispensary—namely, that the actual number of Patients who received assistance there must have greatly exceeded the registered, "as several members of a family were supplied with Medicines under one name;" lastly, the necessity experienced for liberally allowing Wine, Porter, and Tonic Medicines, owing to the nature of the diseases encountered; but concludes without any observations on such topics as generally gave additional interest to previous documents of the kind.*

Hospital, which has hitherto been attended with much inconveniency to the Patients."

5th May 1818: "The Meeting direct Mr. Booth, the Keeper, to see that the orders of the Managers be strictly enforced—that no person wishing to visit the Hospital be admitted without presenting a written order from one or more Managers." Again, though not relating to Asylum Patients, the following Minute shows similar attention. 5th March 1822: "The Meeting, understanding that the Keeper of the Asylum complains that numbers of persons are in the practice, on Sundays, of visiting the Patients in the Infirmary, which has often proved of much inconvenience, instruct the House Committee to issue orders that no persons shall be allowed to visit persons in the Infirmary on Sundays, except betwixt the hours of twelve and one, and four and six."

4th May 1824: A Committee reported, *inter alia*, that, "in order to put a stop to the indiscriminate admission of persons to view the Lunatic Patients, no person—not a Manager—be permitted to see them generally, except Medical Practitioners of character, who are known to have turned their attention to the treatment of the insane; and that such persons shall be attended by one of the Physicians to the Hospital—that the relatives or other persons on whose application a Patient has been placed in the House, and those having their written authority, may have an interview with him or her in the parlour, or their own apartments, at any time when access is not forbidden by the Physician—and that it be recommended to the Annual General Meeting to adopt regulations to the above effect, leaving the House itself, its arrangements, and general economy, open, as at present, to the inspection of all who have a Manager's order for admission."

Accordingly, 8th June following: The Managers, adopting part of the recommendation, unanimously resolve—"That no person—not a Manager—be permitted to see them generally, except in company of one of the Managers or attending Physicians; but that relations or other persons on whose application a Patient has been placed in the House, and those having their written authority, may have an interview with him or her in the parlour, or in their own apartments, at any time when access is not forbidden by the Physician."

* Mr. Wilson was again appointed Chaplain as before, and, in point of fact, has continued to be so—latterly at a small advance of salary—till the present day.

On 2d September of this year, suggestions on the matter having preceded, "Mr. Charles Barclay, from the House Committee, having submitted plans, &c., of additional airing grounds and cells, the Managers, after examining the same, and adjourning to the Asylum to have a personal inspection of the premises, unanimously agreed that four cells, with airing grounds attached, should

In reviewing these Reports—now for the first time brought under the eye of the public—it seems utterly impossible to avoid the expression of one sentiment, which they must produce in all liberal minds—admiration at the vigilance, the compassionate anxiety, the industrious zeal, the soundness of judgment, and, above all things, the candid, straightforward spirit, of those professional Gentlemen from whom they emanated. If, again, the number and the nature of the proposals, together with the information which they disclose, be fairly considered in themselves, and, still more, in relation to the advances which the Institution either made or was yet to make, a conviction not less to the honor of the same individuals will infallibly arise: the Medical Attendants, notwithstanding disadvantages flowing from a system which necessity rather than opinion sanctioned, were equally faithful in discharging immediate duties, and conducive to a series of improvements, the partial accomplishment of which was reserved for the better days of their successor, and the complete realization is still rather due to their sagacity than to be contended for by arguments which they left unpropounded.

We come now to the Reports, four in number, drawn up by Dr. Browne, and published by order of the Managers—a circumstance which, in one point of view, might be supposed conclusive against such quotations from them as have occupied several of the preceding pages. But this opinion will at once give way, if the originally limited circulation, and, still more, the real value, of these documents be duly considered. The task of selection, though every way agreeable, nevertheless requires delicacy, in order to avoid unnecessary repetition, without impairing, if this be possible, either the interest or the concinnity of the productions themselves.

9th June 1835: "In investigating the present condition, or the sources of the prospective improvement of the Montrose Lunatic Asylum, there are certain circumstances to be taken into consideration as peculiar, or at least as not existing to the *same* extent in Institutions of a simi-

be built upon the square behind the main building, and adjoining to the washing-house." The objects in view, it appears from a previous Minute, were to separate the more furious Patients from the peaceable, and to provide work-shops for those who were disposed to labour. Dr. Browne specially referred to the additional cells in his first Report. But the work-shops, frequently contemplated in theory, have not got a substantial existence,—one room only being allotted to weaving, in which a few Patients occasionally are occupied.

lar nature. The *first* is, that a large proportion of the Patients are affected with the chronic forms of Insanity, and either have originally been, or through the lapse of years have become, fatuous and idiotic. The duration of the confinement of some of these unfortunate individuals is coeval with that of the Asylum itself; and where this is not the case, the majority have passed periods varying from five to fifteen years in their present situation. In addition to this, from the indiscriminate admission of Epileptics and Congenital Idiots, the class of *incurables* has swelled to an amount *apparently* disproportionate to the gross number of the Patients, and *actually* so to the same class in other institutions of recent origin which have adopted the salutary rule of excluding all individuals labouring under Epilepsy or Idiocy.

"The second circumstance is, that the Asylum is connected with an Infirmary. Whatever other objections may be urged to such a union, it is clearly obnoxious to this, that the best part of the House—that, in fact, which, from its elevated position, from the extensive view which it commands, and from the commodious apartments into which the wards are capable of being constructed, is admirably adapted for the residence of Patients of a higher class—is at present devoted to the reception of surgical and other non-contagious diseases.

"The advantages of breaking in upon the current of distempered thought—of interrupting the monotony of the pursuit and occupations in an Asylum, by any means, but especially by an appeal to external nature—has been felt by all who have been intrusted with the care of the Insane. Here, although there are ample means of putting this principle into execution, and of thereby increasing the utility of the Institution, and, what is above all other considerations, of contributing to the happiness of the inmates, it has hitherto been found difficult to effect any alteration in the existing arrangement. Until, however, some change do take place—until a separation of the two Establishments be accomplished—the Asylum cannot but be regarded as crippled of those improvements of which it is susceptible, and as hampered and limited in the sphere of its utility.

"Deeply impressed with the opinion that unless the principle of classification be carried into extensive operation, all other efforts to secure the comfort or promote the reco-

very of Lunatics must be nugatory, the Committee have directed their attention to the immediate accomplishment of this desirable end. The first step has been taken by separating the furious and vindictive Patients from the docile, the good-tempered, and the industrious. Where a Patient is convalescent, enjoys a lucid interval, or is so slightly and partially insane as to be affected by external moral impressions, the effect produced by association with the violent madman is most pernicious. His passions spread to all around, and, either by exciting a new paroxysm, or giving rise to such feelings of horror and disgust that misery and despondency cannot fail to follow, render abortive every attempt at cure, or in confirming the previous condition.

"The Committee have therefore adopted a plan which at once relieves the ordinary Patients from the disturbance and painful impressions occasioned by the demeanour of the furious maniac under coercion, restores such an individual to perfect freedom, and what is more, to freedom compatible with his own safety and that of others, and with the exercise of such powers as he still retains. This plan consists in the erection of four large cells, at some distance from the main building. The solitude is not complete, and is only resorted to in cases of incorrigible violence and vindictiveness. The Patient receives frequent visits from the Keepers, Superintendent, &c., and whenever he manifests a disposition to become reasonable and gentle, is again admitted, as a reward, to the Common Hall. Each cell opens into a court-yard, where the Patient may take constant exercise unrestrained by fetters, and without danger to his own person, or to the property of the Institution. As a remedial measure, this system of isolation has been found in some Asylums to prove highly serviceable in quieting the turbulent and irascible, probably from its excluding all those sources of annoyance and irritation to which they are exposed in Public Halls.

"Another important advance towards a complete and scientific classification is the construction of a Parlour for such of the female Patients as, from the character of their malady, can be spared incessant surveillance, and from their station in society, habits, and tastes, can feel and prize the luxury of an apartment which does not remind them of confinement, or of their moral privation, and at the same time affords them opportunities of pursuing their

work, of reading, or of enjoying music, as they may feel inclined.

"No class has, however, been forgotten, and weekly music and dancing relieve the more important pursuits of the pauper portion of the little community. The anxiety with which these amusements are anticipated, and the zest with which they are enjoyed, are highly gratifying. Certain individuals are disinclined, or prohibited, in consequence of the form of their complaint, from joining in such a scene of excitement; but in general, greater difficulty is experienced in restraining than in arousing their disposition to participate. When the hope of restoring an individual to society is for ever gone, there still remains the hope that by kindness, gentleness—by occupation and recreation—much of the irksomeness of captivity may be removed, and many of the pangs of mental disquietude allayed. With this view, the importance of employing the Patients in any way, but especially in that which is most congenial to their habits while in health, is constantly inculcated. Occupation is in itself useful in producing sustained and regular habits, but is infinitely more so in arresting the attention and engaging such other powers as are required in the performance of the work, and thus rendering it impossible for the workman to dwell with the same intensity, at least, on those morbid trains of thought which constitute his malady. Unless Patients are induced to have recourse to some employment very soon after admission, it is found extremely difficult to rouse them from the state of lethargy and abstraction into which they fall. From this circumstance, and from the attempt to apply the principle being recent, the number of those actively engaged is not yet so great as might be desired. About one-half, however, are either constantly or occasionally employed. And while the sound of the piano is heard, showing that there may be mirth, that of the loom and spinning-wheel affords pleasing evidence that there may be willing industry within the walls of an Asylum. The clothes of the females are generally made, and the clothes of all the Patients are mended, in the House, and by the assistance of the Lunatics themselves. The majority of the female workers are busied in knitting, spinning, or sewing: some of them assist in the laundry, kitchen, and in various departments of the household. One, strange to say, has for some time acted, and acted with exemplary

fidelity, as porter to the Establishment. The male Patients are principally engaged in gardening, weaving, &c.; but some of them have literary tastes, and greedily peruse such works as are procured from the Library—the Newspaper, Penny Magazines, &c. The great inducement to work is generally found in the Patient's own bosom, in the insipidity of idleness, or in the wish to escape from himself. Where such motives are wanting, persuasion may sometimes avail—an appeal to the selfish feelings is still more successful—and the expectation of rewards, or rather remuneration for labour, proves, in nine cases out of ten, successful. Punishment is an act, and even a word, that should never be alluded to. Coercion *may* be absolutely necessary, but to designate it punishment is to treat the man who is held to be guilty as sane at the very moment when he is least so, as evidenced by the violence or insubordination which it is intended to control. Very rarely does the employment of this agent, or even the threat of it, avail anything in *compelling* a Patient to work. It rather inspires a spirit of disobedience, dislike, or resistance—feelings which are likely to frustrate the end in view, and tend directly to aggravate mental disease. Hence the Managers have judiciously proposed that the Patients shall in future have an interest in the products of their labour, and receive payment in the form of those innocent indulgences or additional comforts they may desire.*

"Alternating with these days of labour, is a day of worship, when the attendance of the clergyman is hailed with expressions of gratitude and gratification. Upon many, his ministrations, as might be expected, fall powerless—they are not heard, or, if heard, are but imperfectly understood: upon others, his presence acts in no other way than as a novelty—as something to be wondered at; but upon a third class, and these at other times the most unmanageable, his accents of prayer appear to produce a soothing and salutary effect. After the obliteration of reason, many of the highest feelings of our nature remain, to which a successful appeal may be made; and those by which we are connected with a higher sphere of ex-

* Correct as the objection to it may be in general, there is a qualified sense in which the principle of *punishment*, equally with that of *reward* (admitted to have a legitimate operation), may and ought to be employed in the treatment of Lunatics. Dr. Browne himself, it will be afterwards seen, remarks that, "to treat the insane as if they were sane, is an axiom now universally admitted."

istence admit as readily of being awakened, on the proper object being presented to them, as the ordinary passions under which the Lunatic acts. Their influence is, in the highest degree, consoling and congenial to the return of mental strength and serenity, and no institution can be complete where such an appeal is not attempted. The effects in each individual are probably as different as in the members of an ordinary congregation, but the general impression produced is that of reverence and order. In whatever spirit the simple truths announced to them may be received, the meeting is almost invariably distinguished by perfect decorum and propriety. Where convalescence has advanced to a certain stage, or where observation has shown that a Patient is trust-worthy, permission is given to attend church, of course under proper superintendence. This is done partly that the idea of imprisonment may be eradicated, partly that re-union with society may be gradual, but chiefly that the mind may be strongly directed to those principles and duties, a knowledge of which renders mental exertion and the cultivation of internal peace and harmony alike an obligation, a reward, and a blessing. No violation of the promises given previous to the grant of such permission as to the deportment and return has occurred.

"When in such a condition as to be able to attend divine service, it is conceived expedient to permit them to visit their friends and acquaintances in town, and to mingle with such society as can be induced to engage in such intercourse. This experiment has been made with perfect success. Visits have been paid, the Patients have deported themselves decorously, and according to the usages of society, and returned willingly, as if to their own home.

"The internal economy of the Establishment has been greatly improved by the introduction of gas into the passages, sitting-rooms, and parlours, and will be still more so by carrying into effect a plan for heating the whole building by means of water, which is now in contemplation. At present, the large apartments alone are heated, and that by means of fires, guarded by those gratings which must be familiar to those who have visited Asylums of old standing. The objections to such a mode are, that it gives the room the appearance of a prison; it is rarely effectual in preventing the mischievous from dragging out the coals on the floor; and, from the fire-place, thus protected, heating only one portion of the room, the whole of the Patients are col-

lected and crowded into one spot. To remedy these evils, and another which may be regarded as even greater and more urgent,—viz., that the parts of the house in which the Patients sleep are destitute of every provision for keeping up a proper temperature—it is proposed that the whole of the house should be heated on the principle of Mr. Perkins, which may be said briefly to consist in making a series of tubes traverse the walls, or surround every apartment, which circulate boiling water, and thus generate and support a proper and equable degree of heat.

"Distinct bathing rooms for the two sexes have been formed, and upon such a scale, and so arranged, that while tepid, warm, cold, and shower baths and douches, can be administered at any period of the day to the most tractable, or to the most violent, a regular succession of baths proceeds, so as to give a bath to every Patient, unless contraindicated, once in ten days, exclusively of those who require it medicinally.

" Still another change has been effected in the arrangements of the Lunatic Department. No visitors, whose motive is curiosity, are allowed to see the Patients. The public have a right to know whether such an establishment be conducted on principles of justice and benevolence, and the law has provided that this right should be duly exercised. It is even expected that the building, the mode of treatment, &c., should be patent to all who have an interest, or desire information, in the matter. But it can neither be claimed as a right, nor is it expedient, that the idle, the ignorant, the curious, and perhaps the callous, should indiscriminately be admitted to gaze on their fellowmen, as they would on the inhabitants of a menagerie, probably to ridicule their peculiarities, or to mock, by idle wonder, their misery. Against all such, the gates are closed.

" It would be unjust to the Managers generally, and ungenerous on my own part, to conclude this Report without stating in the strongest terms how much the Institution is indebted to the existing House Committee for the zeal and energy displayed in carrying into effect, in the best and most expeditious manner, the improvements which have been enumerated. Every plan has been considered, and every measure adopted, which promised to enlarge the comfort and contentment of those for whose interest they were appointed to act. Much time and convenience have been sacrificed to secure these objects, and although many ob-

stacles opposed and retarded the progress of the proposed improvements, the House Committee have never for a day lost sight of the principle with which they started; and what is the best test of their constant activity, the close of their administration of the trust reposed in them has been as vigorous and practically useful as its commencement. They have acted, in short, as the guardians of the poor and helpless ought to act." *

* In relation to one part of the above Report—that, namely, which contains the words, "Still another change has been effected, &c.; no visitors, whose motive is curiosity, are *now* allowed to see the Patients," &c.—there took place a Correspondence, of which, in justice to all concerned, notice is required. But, thoroughly to understand its merits, the reader will please recur to the Footnote at p. 120, where certain regulations by the Managers are quoted.

"TO THE EDITOR OF THE MONTROSE REVIEW.

"SIR,—Your insertion of the following Communication will much oblige those whose names are attached to it.

"Montrose, August 13, 1835."

'TO THE EDITOR OF THE EDINBURGH ADVERTISER.

'SIR,—We observe in an article in your paper of the 7th current, headed "Montrose Lunatic Asylum," the following paragraph:

"One important alteration in the management of this Institution has been introduced by Dr. Browne, which others would do well to copy. Before his appointment, it was the practice to admit visitors indiscriminately; idlers and loungers from the town found the gates open at all hours, and had it in their power to gaze on the fatuous inmates under all circumstances, perhaps to make cruel sport of their peculiarities, or tease and irritate them by impertinent interference. This improper custom has very wisely been abolished. No strangers, whose motive is mere curiosity, are now allowed to see the Patients; there are times when their presence would be detrimental to the peace and comfort of those unfortunate creatures; and on these occasions no admittance is granted."

'From this the public, or at least that part of it which takes an interest in the management of Lunatic Asylums, must be led to suppose that the Institution here had been, till lately, little else than a sort of Zoological Garden, where the idle and unfeeling gratified a depraved taste, by gazing at its unhappy inmates.

'Now, we beg to inform you that this statement is quite contrary to the fact. We had the honor of being connected with the establishment, in a medical capacity, for several years (two of us for twelve years) previously to the late change in its medical superintendence, and at no period of that time was indiscriminate admission of strangers to the Institution permitted. There was a positive rule laid down, more than ten years ago, regarding this; and so strictly was the exclusion of all—save relations or necessary attendants—observed, that even the students attending the Infirmary attached to the Institution had not been, latterly, permitted to see the insane Patients. Occasionally, of course, strangers were admitted, who had other objects than mere curiosity,—but they were always accompanied by a Manager or Medical Attendant. Cases of this kind, however, were *the exception*, not *the rule*; and that such very proper exceptions are still made, your own late visit is sufficient evidence. We are well aware that the statement alluded to must have originated in misapprehension or misinformation; and our sole object in addressing you thus publicly is to vindicate ourselves from the charge of culpable negligence in the performance of our duties, which it tacitly imputes to us. For Mr. Browne, the present Medical Superintendent, we have the highest respect; and we have only to express a hope that the exertions which he is making, in conjunction with the Managers, for the improvement of the Institution, may meet with the success which they deserve.—We are, Sir, your most obedient servants, 'D. NIDDRIE, M. CAMPBELL, D. WHYTE.

'Montrose, August 13, 1835.'

June 1836: "There is generally a great sameness in the Reports of the affairs of Public Asylums. They have this peculiarity, however, that if they state any, the slightest improvement in the mode of treating, lodging, or amusing the Insane, they commemorate the discovery of a new engine of benevolence, the amelioration of the greatest misfortune with which man can be visited.

"We have not many or startling facts to announce; but still there is much in the history of the experience of the past year which shows the steady progress of the Institution towards that state of usefulness which, from its situation and extent, it is calculated to attain. The House Committee have devoted themselves principally to the full development of those capabilities and advantages which already exist, and which may be rendered instrumental in forwarding the general plan, without calling for a great outlay of capital.

(From the Edinburgh Advertiser.)

"We have received a letter from Montrose, dated 13th instant, and signed by three individuals, Messrs. D. Niddrie, M. Campbell, and D. Whyte, in reference to what we said about the improper practice which prevailed, before the appointment of the present Superintendent, of admitting visitors to the Asylum, indiscriminately, and at all times. These gentlemen state that they 'had the honor of being connected with the Establishment, in a medical capacity, for several years (two of them for twelve years), previously to the late change in its medical superintendence; and that, at no period of that time, was indiscriminate admission of strangers to the Institution permitted.' Now, we beg to inform our correspondents, of whom we know nothing, that we had not the remotest intention of casting reflections on them or any one else in charge of the Asylum. The fault lay rather in the system than with the individuals who managed it. But, notwithstanding the assertion of our correspondents to the contrary, we feel perfectly secure in maintaining the accuracy of our statement, and could prove it by the testimony of hundreds of living witnesses. That the nuisance may not have prevailed to the same extent as formerly, while these individuals were connected with the Institution, we readily admit; but we know (and we have their own concession of the fact in their letter) that it did prevail to a very inconvenient and disagreeable extent up to the period when the present Superintendent was placed in the management. We may state, in conclusion, that we deem it unnecessary to insert the letter, as it has already appeared in the columns of another journal."

"TO THE EDITOR OF THE EDINBURGH ADVERTISER.

"We had the honor to address ourselves to you on the 13th current, with the view of repelling an unfounded charge against us, in our professional capacity, which appeared in your paper on the 7th. In yesterday's *Advertiser*, we perceive, you condescend to notice our communication; but, instead of doing us the justice which we had a right to expect, you suppress our letter, and misrepresent its contents. We deny that it contained any, the slightest, admission of the existence of the nuisance which you strive to make so much of, in your account of the abuses formerly prevailing in the Montrose Asylum; and we again assert, that your former statement regarding the indiscriminate admission of strangers to that Institution, at all hours and under all circumstances, was contrary to the truth. Until we hear the evidence of some of the 'hundreds of living witnesses' you speak of as capable of bearing you out in your assertion, we shall give ourselves no farther trouble about this matter.—We are, Sir, your obedient servants,

"D. NIDDRIE, M. CAMPBELL, D. WHYTE.

"Montrose, August 19, 1835."

"Keeping this in view, a very decided improvement has been effected in the external appearance of the building, by converting the large bleaching-greens immediately behind the kitchen into a flower-garden. A portion of ground has been inclosed at the back of the washing-house, for drying and bleaching, which, as it communicates directly with the laundry, and is not seen from the windows of the Asylum, is in every respect preferable to the old arrangement. A very beautiful design for laying out the ground was kindly afforded by Mr. Myers, which was executed by the servants, assisted by the Lunatics; and now, while the wash-house is nearly concealed, partly by a Chinese paling, upon which creepers are to be trained, and partly by a strip of shrubbery, the centre is appropriated to plots cut in the sward, in which many hundred flowering shrubs have been planted, and which already promise to reward us by early and luxuriant vegetation. The whole is surrounded by a rustic paling; and fruit-trees and creepers have been planted with the view of relieving the dead sameness of the outer walls. It was not solely that an object of beauty might be produced that this step was recommended: it was that the agreeable impressions conveyed to the Patients might be increased in number—that those who are denied all access to the country and its enjoyments might have some of its most pleasing features presented within their prison-house—and that the happy and healthy feelings which generally flow from a contemplation of external objects might be frequently suggested.

"The practicability and utility of a regular system of employment have been fully and fairly tested during the past year. The object was not merely to amuse, but to cure; not merely to occupy minds which, under other less favorable circumstances, would be benumbed by lethargy or concentrated upon their real or imaginary sorrows, but to create new and pleasing objects of thought—to excite desires and interests which are connected with a tranquil and healthy condition of mind—in short, to offer temptations to the Lunatic to co-operate in his own restoration. So successfully have these objects been accomplished, that while formerly the complaint in conducting such establishments was, that no means could be devised to induce the unfortunate inmates to engage in active exertions of any kind, our complaint now is, that those willing and able to work far exceed our opportunities of gratifying their desire.

Our labourers are often thrown idle, but it is not from any inclination to be so, but from the paucity of means whereby their minds and muscles may be called into activity. Although, from the situation of the Asylum, a large proportion of the pauper Lunatics admitted belong to the agricultural population, and are, accordingly, neither so well capacitated for, nor so easily reconciled to, mechanical or other in-door occupations, we have succeeded—*first*, in finding employment for *every individual* received into the House since last Report; and, *secondly*, in communicating the impulse to industry to all those previously admitted, with four or five exceptions.

"The difficulty consists in discovering pursuits sufficiently useful, important, and permanent, as shall be adapted to the taste, previous habits, and present dispotions of the Lunatic, as shall in some form adequately repay his exertions, and prove an inexhaustible source of interest. It is necessary to attend to these circumstances in resorting to occupation, as an element in the moral treatment of the insane. For, if we intrust the most irreflective with a frivolous commission, or with some piece of work which is prescribed to arrest the attention, but which is incapable of producing benefit either to himself or others,—the design is often detected, his pride is offended, the task is performed reluctantly and without interest or animation, and the moral effect is lost. But in employment, the object and utility of which is explained and understood, and upon the faithful execution of which some reward or indulgence depends, the great majority of Lunatics will, at a certain stage of the disease, cheerfully engage. This is a strong argument for enabling each to pursue his *own* profession, so far as it may be practicable or safe. To induce the idle, the stubborn, or the selfish, to apply themselves to some occupation, and to encourage them to persevere when they have commenced, it has been laid down and acted on as a rule to hold out some additional comfort or luxury, some increase of liberty—the gratification, in fact, of some innocent wish—as the *remuneration* for the work performed. Many embrace the proposal to have recourse to occupation with alacrity and joy, as if they anticipated in activity a protection from their misery; and still a larger number, having once actually found that protection which they desired, cling to their daily task as to a source of happiness. But to neither

of these classes will the pleasure be diminished by a conviction that they will be rewarded for their exertions; and, in the case of individuals who, from the nature of their malady, education, or original disposition, are not accessible to higher motives, the prospect of *payment*, in some form or other, will be found to prove an irresistible stimulus. Success justifies us in claiming some merit for recognising that as a principle in the moral treatment of Lunatics which has generally been condemned as injurious, or overlooked as of problematical utility. As an extension of these views, small sums, with the approbation of the House Committee, have been set apart from the earnings of Patients, and presented to them on their discharge. Supported as many of these persons are by the parishes to which they belong, or by public benevolence, while insane and confined, they lose all claim upon these sources by their dismissal: they pass from the protection of a quiet home, are cast upon society penniless—it may be, without friends, or a single being who will shelter or sustain them—incapable of engaging in their ordinary trade, and unable to obtain employment were they capable. This cannot fail to inflict misery, to threaten the still delicate tenure of health, and, undoing all that which care and kindness had accomplished, to bring about a relapse. The remedy for this evil was self-evident. Wherever productive labour has been introduced, let the revenue derived from the articles manufactured, or saved by services performed, be taxed; and in all claimant cases, let the amount thus collected be expended in providing for the safety and support of the pauper Patients after they have left the House,—being placed in their own hands, or, what is better, in those of responsible guardians.

"The effect of taking advantage of these and similar motives has been to substitute a scene of industry and cheerfulness for one of sloth and melancholy—to place the minds of all in the circumstances most favorable to the re-establishment of sanity—and where such a termination, from the nature of the case, cannot be expected, to confer that limited portion of happiness which springs from regular occupation, and which is open to the most confirmed and extravagant Lunatic. To compel the hands to work in place of the head, or to confine the mental operation to that which is required to conduct the mechanical exertion, is confessedly the great object of all these arrange-

ments. But it is not the sole object. It is intended to give a tone and vigour to the constitution by activity and exercise. And in order to accomplish this, as many of the Patients as can be induced, or are able, to labour in the open air, have tasks assigned them. Weaving and spinning are excellent, even as exclusive occupations; but, if possible, they should alternate with, and ought never to usurp the place of, employment requiring the play of the lungs and muscles in the open air. In our miniature manufactory, the oakum-teasers, being the most numerous, and generally belonging to the most degraded class of Patients, are always the most conspicuous of the groups; but spinning, winding of yarn, knitting, sewing, are all proceeding at the same time: in an adjoining room, there is a shoemaker and tailor; further on, there is an amanuensis, whose labours, besides the transcription of many hundred pages of documents relating to the Asylum, have enabled the Superintendent to deliver a course of lectures on Insanity, by extending his notes in a beautiful and distinct hand. Three looms have been constantly at work. Six weavers have in succession produced nearly 5000 yards of cloth of various descriptions. For the means of conducting this department upon such a scale, we are deeply indebted to the kindness and liberality of Provost Jameson.

"A melancholy interest attaches to the attempt of the Lunatics to teach each other. The experienced oakum-teaser has been seen to guide the hands of his more imbecile associate; and the weaver, of two degrees of sanity, often affords instruction and assistance to his fellow-workman of one. The effect of such kindly offices and superintendence is of great benefit where the community is divided into a number of groups, according to the profession, or disposition, of the members.

"Regular hours are set apart for labour and recreation; and when the evening comes, one or even more of the male Lunatics join the Keeper in playing the fiddle or in singing —a concert which, whatever may be its merits, generally collects an attentive and delighted audience, and sometimes suggests a unanimous desire for a reel, which is danced with all the glee and fervor which real joyousness communicates. To show how little disposition there is to violence among Lunatics who are kindly treated and trusted, it may be mentioned that the musical instruments, and even a mirror, have hung in the Common-Hall for the last year

uninjured and untouched. Latterly, music, dancing, and cards—the winter amusements—have been abandoned for foot-ball, which at this season is preferable, as affording excellent exercise and being less exclusive.

"This subject may be concluded by stating how desirable it is that separate workshops should be provided for those who are inclined to apply themselves to mechanical arts. Such an arrangement gives free scope to the powers and perseverance of every individual; so that, unembarrassed and uninterrupted by the idle or the mischievous, every branch of industry may proceed regularly and systematically; and, what is even more advantageous, it serves as a substitute—an imperfect one, it is admitted—for that extensive classification which is founded on the character of the malady, and can only be carried into effect where the form and size of the institution are such as to render the dictates of science applicable.

"In order to re-awaken many of the associations which contribute or are essential to our happiness in active life, but which may have been weakened or forgotten during long confinement—and to renew gradually those ties and sympathies which, if suddenly recalled, might prove hurtful—some of the convalescent Patients are permitted to accompany the Keepers on their visits to town, and to witness those scenes in which they are speedily to mingle as actors.

"The regular attendance of five of the Patients on the Lectures delivered to the Literary and Scientific Institution is somewhat inconsistent with the opinions formerly prevalent, and would greatly astonish the advocates for bolts, bars, chains, and rigid restraint. But not only is no attempt to escape meditated by these persons—not only do they conduct themselves with perfect propriety, and derive delight from the privileges which have been granted them—but in most instances they follow the lecturer as attentively, retain as many of the leading parts of the subject, and deliver as judicious a critique on the merits of the performance, as could be expected from the rest of the audience.*

"In the internal economy of the House, several alterations have been made which are in keeping with the most recent improvements in similar establishments. A plentiful

* Dr. Browne himself, it is proper to record, was one of the ablest and most successful of the Lecturers alluded to.

supply of water has been introduced into each of the public halls, and alcoves erected of such size, and with such accommodation, that they serve as dressing-closets for the Patients—an advance in comfort which may fairly be contrasted with the old custom of promiscuous washing and dressing. Water-closets have likewise been constructed on such a principle as to place the cleanliness necessary to be observed beyond the control of the Patients, by making it depend upon the opening and shutting of the door, which raises a valve and admits water.

"Rooms are in a state of preparation as parlours and bed-rooms *en suite*, which, when completed, will enable the Institution to receive and suitably accommodate Patients belonging to the higher classes of society, and whose friends generally, and upon just and humane grounds, stipulate for apartments and attendance as closely resembling those to which they have been previously accustomed as possible—a demand which every modern Asylum should be able to satisfy. But that change for which there exist the strongest reasons for congratulation is, that the female Patients who, by education, manners, or the stage of their malady, are able to appreciate and enjoy such an indulgence, now associate and take all their meals with the Matron. In place of being condemned to the comfortless and solitary meal, or to the rude usages of a public hall, they mingle together as one family, and participate in all the pleasures, while they are led to observe all the rules and habits, of a well-conducted domestic circle. Convenience and economy most fortunately prove allies to humanity, in bringing about a change in this respect. It is easier for the domestics, and cheaper as well as better for the Patients, that they should, when not prevented by the nature of their symptoms, eat in society, and, if practicable, at the same table with the Superintendent or Matron, or, when paupers, or poor, under the eye of a Keeper. The presence of those whom they respect, or of strangers whose applause they desire, will act as a restraining force, ebullitions of passion or folly will be controlled, the customs of society will be scrupulously attended to, and many agreeable impressions will be communicated which will be resting places to memory and beacons to hope.

"Although thus assimilating the condition of those who are placed in the Asylum to that to which they have been habituated when at liberty and in health, there is one

circumstance which obstructs all attempts to carry out the principle to its legitimate consequences, or to place this Institution on a footing of equality with others, the local and architectural advantages of which are neither greater nor more easily available. This is the connexion of a Retreat for the Insane with a Public Hospital."

[Then, having reiterated objections, of undoubted and now fully admitted cogency, to this arrangement, Dr. Browne proceeds :]—"The tranquillizing effects of public worship continue to be recognised. Perfect silence, solemnity, and reverence, pervade the assembled worshippers: the return of the Chaplain is anxiously looked for; and there is reason to believe that his ministrations communicate at least a temporary calm to bosoms which are generally agitated by remorse or revenge. At present, the Clergyman visits the Asylum on Thursday, reads a chapter, and prays to the male and female Patients separately; but, in order to enlarge the sphere of benefit derivable from such a source, it is in contemplation to secure his presence upon Sunday—to assemble the Patients together in some apartment set apart for the purposes of worship, and to add Psalmody to the service.* By this alteration, the secular object will be gained, of breaking in on the monotony and consequent lethargy which characterize a day devoid of occupation, while the higher objects are fulfilled, of multiplying the moral impressions produced; the sacred nature of the institution will be recalled, and, with that fact, many of the thoughts of other years, which, as connected with an unimpaired state of mind, and the performance of a duty, are generally serene and salutary; sentiments of reverence and humility are engendered, the hope of the return of the day of peace is excited, and an anticipation of the same calm thoughts and recollections. The introduction of praise is of importance, as enabling many of those who have not intelligence to follow or understand what is read or said, to join in what is sung. Those who, under proper discrimination, can thus be brought to worship their Creator, or who can so far restrain their follies and extravagances as to evince respect towards the devotional exercises of others, are in a state of mind incompatible with violent excitement or exquisite misery, and consequently more susceptible of being affected by other and ordinary means of cure. While to such as it

* Of late, the service has been always on Sunday.

would be hazardous to permit to attend the Parish Church, even when under the direct superintendence of the Matron or servants, such a provision should be secured, no occasion is lost of inculcating the propriety of going to the public places of worship, or of holding out the permission to do so as one of the incitements to, and rewards for, calm and sensible demeanour. There is a complete guarantee in the presence of the Matron, and in the well-ascertained dispositions of the Patients themselves, that no disturbance or interruption shall occur in the Church. And while it may be admitted that the consolations of religion may occasionally fall upon a heart in some measure incapacitated for feeling their efficacy, the effort here made to soothe or strengthen, or rouse that heart by such means, cannot be regarded in any other light than as the duty of a philanthropist and Christian.

" I cannot conclude this Report without expressing how deeply indebted the Institution has been to the kind interest and indefatigable exertions of the House Committee. The best evidence of their superintending care exists in the marked improvements which have been effected under their management; and the best reward, and the only one which they could have in view, is afforded by the increased happiness of those intrusted to their charge."

June 1837: " One great and decisive advance has been made towards the improvement of the Asylum during the past year. The separation of the two departments, of which it consists, is all but completed. The Special and House Committee, appointed at last Meeting, gave in a Report at the beginning of the year, which, besides strongly insisting on the expediency of establishing a distinct Infirmary, showed, by statements and statistical tables of great clearness and value, the probable expense of such a building—the resources by which it might be maintained —and the means by which these might be materially increased. Acting on these representations, a sum of £1000 was voted at a General Meeting towards this object, and an appeal to the public resolved upon. How nobly that appeal has been responded to, is proved by the present amount of the subscription. A sum has been collected, nearly £3000 (£2000 of which consists of Public Subscriptions), considerably exceeding the expectations of the most sanguine and benevolent, but still falling short of the ne-

cessities of the occasion, and especially of what will be required to support the Institution after its erection. But no doubt whatever can be entertained that, either now or after the benefits of so pure and unexceptionable a means of extending assistance to the most destitute of the sick poor are seen and felt; after it is perceived that in relieving others we protect ourselves, and remove an ever-active and destroying pestilence from the bosom of the community; a revenue will arise amply sufficient to secure the independence and affluence which all such institutions should possess. In addition to a munificent donation of £200, the Town-Council of the Burgh have agreed to dispose of a locality for a site, and have throughout the negociation displayed a spirit of liberality deserving of the approbation and gratitude of the public, in whose behalf they have acted.

"This is perhaps not the place to enlarge upon either the views or the arrangements of those to whose charge the accomplishment of this design is intrusted, further than to say that both of these tend to encourage the hope that before another Annual Meeting, the New Infirmary will be open for the reception of Patients. But it cannot be regarded as improper or unsuitable here to express the great sense of obligation which all must perceive is due, and which it is believed all classes of the community unanimously feel, towards the House and Special Committees for their long-continued exertions in the cause of humanity, and for the great boon to the poor and afflicted which these exertions have secured. All that need be said is, that they are engaged in building the noblest monument that the genius of man has devised either to commemorate or perpetuate good. But, in awarding just praise to those under whose auspices the coping-stone may be said to have been placed, it ought not to be forgotten that the foundation was laid at a more remote period; that the object now so nearly accomplished has been long cherished by successive House Committees and by the General Board of Management; and that at one time the zeal and energy of Mr. Willis, and those associated with him, had advanced the project very near the point at which it has now arrived.*

"The magnitude of this undertaking has naturally and

* Circumstances, which need not be specified here, have prevented the completion and opening of the New Infirmary till the appearance of this Sketch.

necessarily so occupied the attention and demanded the efforts of the House Committee as materially to interfere with, but it cannot well be said to retard, the execution of several plans which, although perhaps not of equal importance as affecting the community at large, are more intimately connected with the interests of the inhabitants of the Asylum." [Dr. B. here adverts to a correspondence with Mr. Perkins, with a view to introducing his mode of heating houses.]

"One of the minor changes in the Establishment has consisted in placing doors at the terminations of the principal galleries, which interrupt the currents of cold air constantly prevailing during the winter and spring, and will be found to contribute greatly to the comfort of the House.

"While this and much more has been done, and is still projected, to increase the accommodation within, there is a slight alteration which would greatly improve the exterior, which might, to a great extent, be carried into effect by the Patients, and which would tend to multiply the pleasurable impressions upon which they depend for happiness, if not for health. This is the conversion of a part, perhaps one-half, of the airing grounds into flower-gardens; and in the section of the House appropriated to the male Patients, the conversion of the other half into bowling-greens. The recently-formed parterre has been so much admired, and is so easily kept, that there is encouragement to proceed. As to the safety of such a measure, it can be insured. Indeed, in addition to shrubs and flowers, there exists no objection to these courts being sheltered by trees, watered by fountains, and supplied with arbours, seats, swings, and all the ordinary accompaniments of a pleasure-ground.

"Our various occupations have proceeded with great activity during the past season; but, notwithstanding, we have still to regret that the number of our workmen far exceeds the means of employment. There are smiths without forges, turners without lathes, and what is more, common labourers whose strength and activity are not sufficiently called into play by the cultivation of our own gardens and grounds. In this dilemma, originating as it does from a difficulty which cannot be obviated by any call upon our own resources, might it not be expedient, as it certainly is practicable, to employ Patients in any great public or other work which is going on near, or at a convenient dis-

tance from the Asylum? Under the guidance and governance of a discreet and trust-worthy Keeper, they could break stones for the highways; they could trench, excavate, carry weights—do everything, in short, which the uneducated but robust labourer can do. While weaving to the extent of upwards of 5000 yards, picking oakum, spinning, knitting, &c., has been carried on with great spirit, numberless other pursuits have been suggested and encouraged which are perhaps unworthy of commemoration, but which have contributed not a little to the benefit and amusement of the individuals who engaged in them, and amply demonstrate the various methods in which the tendency to activity and industry may be developed, and the illimitable extent of our resources in opposing the tendency to idleness and morbid abstraction. The Superintendent has published a small book on the past and present condition of Asylums: the manuscript of which was transcribed by one Lunatic, and the proof-sheets corrected by another; and the printing and binding of which might have been executed likewise by Patients, had the requisite types, presses, &c., been accessible.* This is an interesting application of the principle. But the effects are not confined to the barren establishment of a principle, or even to the temporary occupation and happiness of the deranged or enfeebled mind. In every case, a marked alteration of symptoms, and in many a complete restoration to sanity, have occurred during, and very evidently in consequence of, regular occupation.

"There are two evils over the correction of which we unfortunately possess no control, and which very manifestly limit the usefulness of an Asylum. The friends or guardians of Patients, from a very mistaken kindness, delay too long to place them under treatment; and from the same motive, whenever a promise of amendment appears, they withdraw them too soon from its influence, and renew suddenly, and at a most critical time, that train of thought and those very impressions which cast a gloom over the recollections of their home and original occupation. This complaint is universal. It is urged by the conductors of all public Asylums. And it is urged with the hope that those most deeply interested may be brought to perceive

* Dr. Browne's Work, *Asylums as they were, as they are, and as they ought to be*, has been most favorably noticed by various Journals, and probably made great impression on the public mind.

that, by postponing remedial measures, they trifle with the sanity and happiness of the objects of their solicitude; they permit the disease to become chronic, and thereby diminish the chances of recovery; and that, on the other hand, by a premature removal from an Asylum, they hazard all that has been gained; they expose the mind, as yet weak and unconsolidated, to a most severe experiment; and, for the gratification of what is in reality a selfish wish, place the permanent restoration of the Patient in imminent peril. Under all such and similar disadvantages, the number of cures in Insanity is very great; but, were relief sought for with the same avidity, and the instructions of the Medical man followed as implicitly in this as in other diseases, the proportion would be nearly doubled.

"Allusion has been made to the permission granted to some of the pauper Patients to attend public lectures. This was done, not as an empty demonstration of what kindness and confidence may effect, but to serve as an intellectual exercise—as a part of moral training."—[Then follows a very pleasing illustration of this, in the case of one Patient who furnished a written statement of a lecture heard by him.]

"The recommendations contained in last year's Report have been attended to; and, while a number of Patients regularly attend Divine Service in the Public Churches and Chapels, worship has been instituted within our own walls on Sunday, for all such as may be benefited, or cannot be injured, by participating in such an ordinance. These generally amount to about fifty of both sexes, who, when assembled together, present the appearance, and, in many instances, are actuated by the sentiments, of a devout congregation. The service consists of reading the Scriptures, prayer, and praise. In the latter, a majority of the Lunatics join; and the impression produced on a sane mind by their simple harmony, at the commencement of the attempt, was so powerful, and at the same time so tranquillizing, as to lead to the hope that, where the insane mind is at all accessible, it will be reached and soothed by such an appeal. Upon the occasion alluded to, the knowledge that many of those around exercised the privilege of praising their Creator for the first time after a long lapse of years, and that many others had no reasonable prospect of ever doing so again, had such an opportunity been withheld, might have heightened the feeling of enjoyment in

the mere observer; but that the minds of those engaged, and most deeply concerned, were completely and pleasurably engrossed by the scene, may be gathered from the fact, that, without previous warning, or preparation, or concert, the Psalm selected was sung with an accuracy and beauty, and an apparent unanimity of purpose, which would have delighted those who anticipated, and even satisfied those who doubted, the success of the attempt. In a foreign Asylum of some celebrity, the principal, and it was believed the most efficacious means of moral treatment employed, was music. But without attributing such wonderful curative powers to this agent, or so entirely relying on the influence which it unquestionably possesses, it deserves, as a part of worship, all the consideration and cultivation which can be bestowed. This recommendation is founded upon the capability of sacred harmony to excite a class of feelings which may be highly instrumental in soothing agitation or encouraging hope. Besides this, it constitutes that part of the service in which the worshipper is expected and called upon to join; and as such participation requires acts of the will, the memory, and attention, directed to new objects and through healthy channels, the result cannot fail to prove beneficial.

"These commendations of one must not be interpreted into a condemnation of another part of religious worship in an Asylum. Indeed, they have been introduced with the view of suggesting that, to render the ordinance complete, and similar to what the worshippers have been familiar with, and to what has been safely and successfully instituted elsewhere, there is still wanting a short, simple, and judicious discourse. And as it would be more, perhaps, than can be expected from a Chaplain, to undertake the task of framing sermons expressly for such a purpose, and on such a model, as the circumstances of the case clearly indicate, portions might be selected and read from the works of approved divines. To treat the insane as if they were sane, is an axiom now universally admitted. But, if we deprive them of that to which they have been accustomed, and to which they know other men have access—if we, as in this instance, withhold what constitutes a large and important portion of the ritual observed in sane congregations—we are adopting the measure most calculated to convince them that they are, or have been, treated as an insane congregation, or at least as a congregation under

peculiar, and therefore degrading circumstances. It appears even to be expedient to carry the principle farther, and to empower the clergyman to give private instructions and admonitions in such cases as admit of this modification of moral treatment. There are cases of religious monomania where the reason may be addressed and engaged in combating extravagance or counteracting despondency; and there are other cases of mania where the feelings may be strengthened against the influence of delusions and erroneous conclusions. From no one can the persuasions or arguments, which promise to accomplish these ends, come with such effect as from a humane and enlightened clergyman. He is not only practised in dealing with the "mind diseased," but he appears armed with an authority, and exercising the rights of a friendship, which other classes, however anxious, can never claim. No allusion is here made to the higher motives which dictate provisions for affording religious consolation to Lunatics, as this is neither the time nor the place, nor is the writer entitled, to consider this part of the subject. These various modes of affecting the religious sentiments have been suggested simply as additions to the general system of treatment—as remedies which the physician should have the right to prescribe, although it be committed to the judgment and tact of the clergyman to administer.

"Besides the customary periodicals, about fifty volumes in various branches of literature and science have been perused by Patients during the year. Indeed, loud and frequent complaints have been made that the supply did not meet the demand. To remove all ground for such a grievance, it has been determined to form a Library for the use of inmates of the House. As yet, the collection does not deserve the name here bestowed; but it will serve as the nucleus for future acquisitions. A judicious selection may greatly increase the instruments by which the mind is protected against itself, is tempted to relinquish habitual trains of thought, or directed to objects of contemplation, which are unconnected with personal feeling, and interest without exciting. The rules which should regulate the selection are very simple and evident. There should be works adapted to all, or, at least, to all virtuous and healthy tastes, but yet of such a character as to be addressed to what *was*, rather than what *is*, the predominating bias of the mind. There must be classes of books calculated to

create a habit and taste for reading, as well as to gratify tastes and habits long established. We must amuse before we instruct. There must be appeals to the affections, as well as antidotes to the effects of such appeals. There must be books, scarcely above the rank of nursery tales, suited to the second childhood entailed by disease; while historical and scientific authors are provided for those who, at certain seasons, differ only in their liability to frequent attacks of disease from the mature and unimpaired intellects by which these have been composed. The collection of such volumes may be managed by a less scrupulous hand than their distribution. In the latter, the ordinary rules of moral treatment must be rigidly observed, and every reader supplied, not according to his wishes, but to his wants, not merely in relation to recreation, but in relation to his recovery. One thing is obvious, that, to render the application of these rules practicable or beneficial, the collection must be extensive.

"Patients have been cured by being re-educated. In one Asylum there is a school for those who cannot read, whether the inability depends upon original neglect, or the ravages of insanity. In a previous report, it was recorded that Lunatics had been taught trades; and it is but a modification of these attempts to teach them, or to cause them to teach their fellows, the alphabet. It is not proposed that this example should be strictly imitated. But the success of such a plan gives a sanction to the endeavour to train the mind, by reading, to healthier and happier habits of thought."

June 1838: "The number of cures considerably exceeds the rate which has as yet been reached, even in the best regulated institutions; and to swell this amount of good, there are to be added the cases of convalescence where sanity is already re-established, or where the mind is in the act of resuming its natural operations; but, where a period of probation is prescribed, and that with the restored health may be conjoined that vigorous tone of mind which enables the Patient to mingle in society, and to be exposed to the various irritations incident to active life, without injury, without danger. This class, at present, consists of about four persons; and, to show from what a degree of estrangement the sentiments may be reclaimed—from what a depth of gloom and degradation the understanding may be raised,

by suitable means—the chief characteristics of the history of each of these individuals may be mentioned. In one, there existed a settled conviction that all hope of salvation must be relinquished. In another, this horrible idea, and the consequent despondency, were mixed up with the singular hallucination, that the body was enveloped in a skin, to which it had no claim. In a third, the memory of time was so completely obliterated, that no recollection was preserved of the day of the week, and, after the expiry of months, the Patient could not determine whether he had been confined for hours or years. The fourth Patient had experienced gross mismanagement or gratuitous cruelty elsewhere, and was consigned to the Asylum in a condition verging on fatuity, with disgusting habits, the result of rigid coercion, his body covered with sores from the injudicious application of that coercion. There is every probability that all these Patients will speedily return to their friends and occupations, without a trace of alienation, and with capacity to renew former ties, to resume former duties, and to regard their residence in an Asylum with satisfaction and gratitude.

"In the absence of a proper convalescent room, an excellent substitute may be found, it is true, by engaging the recovered Patients to do the work of the House as servants —a situation which, besides being a post of honor, affords ample exercise and distraction, and conveys to the minds of the Lunatics the agreeable and restorative conviction, that they are worthy of being trusted, that they have duties to discharge, and that upon their conduct, under this responsibility, depends their restoration and liberation. But such provision is applicable to pauper Patients only, or to such as are already so rational and prudent as to prefer the certainty of cure to vague notions of dignity. But there are others, of such rank and character, as to render such an expedient unwarrantable. For them a distinct apartment, and well-selected associates, are indispensable."—[Then, in reference to classification, as likely to be materially aided by the separation of the Infirmary allowing increased accommodation, Dr. Browne proceeds:]

"There are several plans by which this object may be accomplished. The wings may be extended to the front boundary-wall—eight additional cells being thus obtained; or another storey may be built upon the common-halls, which would give much more ample accommodation. And

it would be judicious, in constructing these, to give them the form of wards or dormitories, rather than that of separate cells, in which four or more Patients might be placed together, under the eye and ministration of an attendant—relieved from t he horrors which solitude and silence so often create or augment—and cheered and supported and supplied with what they require, if agitated by delusions, or attacked by indisposition. But should the progress of other improvements, or any unforeseen circumstances, postpone the adoption of such a proposal—and should the Directors prefer, as they undoubtedly will prefer, to decline admission to applicants, rather than crowd the inmates for the time being—a more extensive, but still defective, system of classification may be established, which will be unattended with expense or delay. By shutting up the door of communication between the two female pauper public-rooms, and by making the entrances to both, when thus separated, from the passage leading to the ladies'-hall, a third hall would be available, sufficiently isolated for all useful purposes. This suggestion is not so applicable, but might be applied, to the public-rooms for the males. In the latter case, however, it would entail the sacrifice of the largest and best-proportioned apartment for Lunatics in the kingdom.

"Let it not be conceived, that the evils of the promiscuous intercourse of Lunatics are exaggerated. It has been clearly demonstrated, that a vast number of the crimes by which the peace of society is disturbed may be traced to the non-separation of prisoners, of different ages, degrees of culpability and experience, and to the instructions, or to the impressions, at least, received in our public jails. The opinions of all practical men concur, that during certain states and stages of disease, the mind is even more susceptible of being influenced by external circumstances than when unimpaired. It receives a bias as readily, towards good or towards evil; it is as prone to imitate, and less circumspect in the choice of an example; it imbibes tastes, and contracts habits, which are as permanent and as powerful, as if acquired under the operation of an unclouded intelligence and vigilant moral feeling. It is a common observation, that one paroxysm of violence originates many; if a single individual become infuriated, the excitement spreads like an epidemic—dormant antipathies are roused —forgotten grounds of grievance are recalled—and the

whole of the little community presents one aspect of irritability, violence, and confusion. But, besides this, delusions are propagated. A pretended Messiah makes converts; a gentleman, imagining himself empowered to raise a regiment, enlists recruits, and a revolution upon a small scale may be concocted against the constituted authorities. Should the subject be considered only in so far as the uninterrupted communion of individuals, so differently situate, affects their moral condition, it is worthy of consideration. For when the mind, partially diseased, or in a state of doubt and despondency, or in the act of emerging from misery and degradation to a consciousness of higher and holier thoughts, is, day after day, compelled to listen to blasphemies and obscenities, or even to views and suggestions of impure or ill-instructed individuals, a vitiation more lamentable—a ruin more irremediable than insanity itself—may be, and in the course of my own experience has been, the consequence. The principle of classification, then, possesses equally the character of a remedial agent, and a preservative from corruption.

"During the first or acute stage of many cases of lunacy, the tranquillity, and regularity, and even the monotony of the course of events, in an Asylum, are useful; but, subsequently, when the mind becomes susceptible of new impressions, these are irksome and injurious. Every effort has, accordingly, been made, to multiply and vary the occupations and amusements, as far as possible. Some of our inmates may occasionally be met with in Rossie or Dunninald Woods, or in other parts of the country, and they return, not merely with the complexion of health, but having the feelings in unison with the calm and beautiful scenes which they have visited. When a ship is to be launched, or a steam-boat to sail, my Patients have formed part of the crowd of spectators. Several of them take a lively interest in the contents and progressive increase of the Natural-Historical Museum, and can announce the addition of a specimen as correctly as the Directors. They have attended public concerts; but as these were not always accessible, and as, by a fortunate coincidence, a number of individuals, with strong and cultivated musical powers, were resident in the Asylum at the same time, there were, during last autumn, repeatedly concerts within our own walls, which, besides yielding great delight to those who can appreciate harmony, were productive of much hilarity and merriment to

others who are less gifted. The proposal suggested in the report for last year has been carried into effect;—the airing-grounds for the females have been enclosed, and formed into flower gardens, similar to that immediately behind the main building, and unite the qualities of a place for exercise, and for care and cultivation. While the agreeable impressions conveyed by the forms of the parterres, by the flowers, &c., will fall upon every eye, it is to be regarded as a privilege to enter the enclosure, and the reward of the highest order of merit to attend the plants.

"Our internal resources have likewise been augmented. The Library now consists of about 130 volumes, and these have been read again and again by every successive group of convalescents, and are even in demand among those who can scarcely be trusted with such an indulgence. Reading works, distributed with due discrimination, cannot fail to operate in two modes:—First, by the distraction which any interesting employment produces; and, secondly, by communicating new objects of thought, correct processes of reasoning, and sound opinions. The utility of such a practice does not require illustration; but it has been extended where no curative effect could be expected—where the only result, in fact, is the temporary and innocent gratification of the Patient. The class who are in this condition is a numerous one, and the greater is the obligation to render those whom we cannot cure contented. Besides those of weakened or unsound mind, who could participate in such pleasures, we have many Lunatics who are unfitted by seclusion alone from entering again upon the world, but who, having contracted attachments to the place and persons by whom they have been surrounded, would not leave the Establishment, or, if they did leave it, would be reduced either to a state of utter helplessness or of hopeless disease by the change.

"Desirous of extending, and at the same time modifying, the principle above inculcated, I have latterly permitted, even encouraged, regular and unrestrained correspondence between certain classes of Patients and their relations. The act of writing, itself, is an excellent occupation; and the caution which must be exercised, in order to compose correctly, or in such a manner as to conciliate the person addressed, to prove the rationality of the writer, and to place a petition in the best possible light, is salutary and restorative. In making this experiment, it was, of course,

necessary to impose upon myself the painful duty of perusing the letters of both parties; but, although unpleasant, and apparently inquisitorial, such an examination acts as an additional check, and insures not merely a strict adherence to truth, which is a condition insisted upon, but a more strict adherence to the rules of composition, orthography, and grammar, than might be otherwise deemed obligatory. But this training is not confined to the intellect. The affections and sympathies are brought back and directed to flow in their original channels—the intimacies of many years are sustained—hopes are directed to their legitimate objects—the intercourse and respect of those who are at once most loved and most dreaded—and ties are preserved with a world which many Patients seem to forget, and with friends who are but too prone to forget them.

"There are, likewise, collateral advantages of such a plan—it enables friends to judge of the real condition of the Patient, and it disabuses all parties concerned, of the notion that either mystery or secrecy or unmitigated seclusion are necessary adjuncts to the treatment of the insane.

"It is quite evident that the participation in many of these indulgences, however beneficial in other respects, places the Patient more beyond the strict surveillance of his attendants than was admissible under the rigid custody practised in former times. Nor can it be denied that the brief enjoyment of liberty is sometimes so tempting as to lead to an abuse of the confidence reposed, and an opportunity is seized upon to escape. This breach of faith, however, is characteristic of human nature, not of insanity. The feelings of honor and probity may be diseased, as well as any other; but when this is not the case, they may, and often do, possess as much influence in the diseased as in the healthy mind. You may encounter in the streets of Paris, or in the Louvre, monomaniacs liberated on parole, whom you have seen in a cell at Charenton in the morning. It is not paradoxical to say, that escapes are often indications of an enlightened and kind system of treatment. They could not possibly occur in the prison-like house, and under the prison-like discipline, formerly employed. But when Patients are freed from chains, allowed occasionally to mingle with their fellow-men, and engage in occupation, various facilities are afforded, which should certainly be guarded against, but which should be counteracted rather

by watchfulness and additional inducements to remain voluntarily, than by bolts and bars.*

"In rooting out the prejudices contracted during, and in consequence of derangement, one of the most obstinate and insurmountable is found to be irritation at the deceptions practised when confinement is first resorted to, and suspicions, that this and all interference with the inclinations are parts of a conspiracy against the personal liberty, property, or happiness of the individual. To meet such an obstacle, never-failing kindness, perfect candour, and an obvious anxiety to remove all just grounds of complaint, are the only weapons. To prevent the occurrence of such distempered feelings, I am of opinion that no deception should be employed in order to place Lunatics in confinement. They ought rather to be forced than entrapped into an Asylum. Let their condition be set clearly before them—let the necessity for medical interference be pointed out as delicately, but as distinctly as possible; and, should they acquiesce in the propriety of the step proposed, all difficulty is removed. But should such a proposal, as is most probable, be met by a declaration that health is unimpaired, and so forth, it will then become expedient to state the determination of the friends of the party to be kind in opposition to his wishes, and to exert the authority conferred on them by the law under such circumstances, by enforcing a residence in an Asylum; and, in the event of any resistance, due preparation should be made to carry the threat into immediate execution. All this should be done either by the natural guardians of the Patient, or by persons acting under their direction; for, when the servants of the institution where the individual is to be placed are employed to bring him to the house, and to coerce him, in order to do so, the result is generally a feeling of dislike and hatred, which all succeeding kindness may fail to eradicate. This preference of force to fraud is founded upon three reasons. First, it exasperates, but it is less offensive to our sense of justice; secondly, it may estrange the affections for a time, but is less calculated to diminish the feelings of respect entertained by the Patient towards his guardians; and, thirdly, deception is itself culpable, not justfiable even by the end in view, and in many cases ministers to the pre-

* The principles maintained in this paragraph are of the highest value in practice, and most creditable to Dr. Browne's judgment, as well as humanity. A Prison and an Asylum ought to be regarded as complete antipodes.

vailing delusions. The number of cases during the past year in which the disease has been protracted by such expedients as are here condemned, seem to justify these observations.*

"A difficulty is often experienced in devising means of re-educating the obscured or barren mind—means which shall be sufficiently attractive to create an interest, and yet so little exciting as to be compatible with perfect serenity and equanimity. Recourse has been had to instruction in particular trades. A peaceable blacksmith has been taught to use the spade; and a violent and vacillating gardener, who could not be safely entrusted with the implements necessary in his profession, has been transformed into an excellent and diligent weaver. So important is employment as an auxiliary to all other remedies, that efforts are generally made to induce Patients to resume their habitual occupations; but, were it practicable, still more decided benefits would accrue from imparting a knowledge of a new and untried occupation. During such a process, new combinations of thought are communicated—a greater stretch of attention is required, than in repeating actions or movements which are familiar, and all danger of suggesting or fostering associations connected with a former, and, in all probability, an unhealthy condition is avoided. Reason, if acting at all, is compelled to act in reference to objects of a totally different class and aspect.

"A sermon is now delivered every Sabbath; and, when it comes from the lips of one, as in the present case, with whom the great majority of the Patients are intimately acquainted—who can well appreciate the limited powers and distorted views of his auditors, and who tempers his admonitions and instructions to the vague remorse, the extravagant hope, the fanatical zeal, or the scepticism, which may actuate these auditors, the healing and healthy influence produced soon becomes obvious. The day on which the practice commenced was a sort of festival—many of the Patients, even of those who are least cognizant of what is passing around them, or who arrogate to themselves powers altogether inconsistent with the truths promulgated by the preacher, flocked around to thank him; and afterwards expressed to me their delight at the restoration of what they

* Nothing can be more judicious than these observations regarding the value of *truth*. In no instance whatever can it be safely departed from, where there is intellect enough to perceive or to learn the deviation.

regarded as a privilege. Pleasure is not always an index of benefit; but the conviction is pressed upon all acquainted with the habits and peculiarities of the insane, that worship so conducted is infinitely preferable to any arrangement in which there is a departure from established custom, founded although that departure may be upon prudential and precautionary motives.

"It is but fair that to my successor should be resigned, at the same time with the duties of the office, the privilege of proposing many of those alterations in the management of the Asylum, which experience or new views may point out, and to urge the completion of those which have already been proposed.

"To the architectural improvement of the edifice there must evidently be limits; to the internal moral regulations there are and can be none.

"Already the usefulness of the Asylum is well and generally appreciated. Its reputation for success ranks as high as that of other establishments, where extensive grounds, and splendour, and elegance of internal decoration, are superadded to the influence of judicious scientific treatment. The erection of the New Infirmary will afford an opportunity of associating some of these with the existing means of assimilating the Asylum to an ordinary and commodious place of residence. These are but accessories, it is true, to more important arrangements; but to raise reason to her seat, by the aid of the external senses, is as much an exercise of benevolence as by the exhibition of a drug, or by a direct appeal to the feelings themselves. A sanguine mind is apt to desire that changes, so momentous in their consequences, should be accomplished at once; but, where amelioration has already been carried so far, while it might be wise to accompany the march of improvement at a somewhat accelerated pace, a gradual is, perhaps, preferable to a sudden revolution. Pinel struck off the chains of the madmen at Bicetre in an hour; but the system at present prevailing in France, and that which it is desirable should be imitated, has required the half-century which has since elapsed for its growth. A few years will suffice for the fruition of these plans; and, while it is difficult to believe that there can be a greater amount of harmony and happiness among the inmates than now exists, or that more sincere and fervent feelings of friendship and gratitude can be experienced towards those who

govern by those who obey, or that a more intense solicitude for the welfare of those who obey can be felt by those who govern,—yet the capabilities of the Institution will doubtless be rendered much more ample and complete—the blessings of enlightened treatment will be more widely diffused and variously applied—and the grand object of all such benevolent exertions will be obtained, in affording the greatest possible amount of relief to the greatest possible number of the diseased."

June 1839—(Dr. Poole's Statement): "Of the Cases left (76), my intelligent and talented predecessor reported so fully, and in several instances more than once, that I have little to say respecting them. They constituted, obviously, by much the larger portion of those who came under my care; and as, besides published documents, the Book in which they were minutely recorded was consigned to me, I had comparatively an easy labour with them. Such guidance would have amply encouraged me, though the field of duty had been more extensive and intricate. But, as only a fourth part of these cases (in point of fact, 9 of each sex) was reckoned CURABLE, my hope of success did not exceed my sense of responsibility. The correctness of Dr. Browne's judgment in this important calculation, though liable, of course, to be modified, favorably or the reverse, by unforeseen circumstances, was ere long no less apparent to me than the skill and precision with which he had delineated special examples of Insanity. It is almost unnecessary to add, that, in his views regarding the improvement of the Asylum, set forth particularly in the Report of last year, I cannot possibly avoid concurring; because they must equally win approval from those who have benevolence enough, and command the assent of all who court opportunity, to understand them. The testimony now given—personally of small moment—will probably be deemed of value by Members of the Medical Profession, who require to be daily assured that principles do exist, in which their brethren, however different in character or habits, can harmonize; and that some of these, neither few nor trivial, relate to a theme which generations of inquirers have left at once an enticement and a disclaimer to ordinary science.

"Notwithstanding one of the remarks above made, and though, as is well known, the likelihood of recovery dimi-

nishes with frightful celerity after the first year of invasion, I have the gratification to state, that about one-half of the Patients mentioned as cured in the preceding Table belonged to the list of old cases. They had been in the House several years, continuously or with intervals, and were, it would seem, rather noticeable personages there,—the useful qualifications of one, more especially, forming an acquisition not always met with in establishments of the kind.* But, on ascertaining that they were harmless—that their eccentricities could not possibly disturb society—that the power of self-control in them bore an adequate proportion to their degree of intelligence—and that a prudent reference to their own interest combined with a desire to be at large—I could not conscientiously hesitate to advise their liberation. Subsequent tidings thoroughly vindicated this award.

"On the other hand, I have been disappointed, as all must be, to whom, in absence of a prophetic spirit, good appearances naturally suggest agreeable expectations. Dr. Browne, in his last Report, referred to four Convalescents, who had risen from a condition nearly altogether hopeless, and of whose speedy return to their friends there was 'every probability.' Now—so precarious is human life, and in a soil so alien are planted its choicest flowers—shortly after the announcement of this promise, in which the individual alluded to had the firmest faith, one of these suddenly dropt into worse than infantile helplessness, and during many months has only by form shown alliance to our race.†

"Like other Institutions which neither select Patients nor limit their residence on trial, the Asylum, in the course of half a century, has accumulated cases of which only one issue is reasonably to be predicted. They must die, and, very probably, without recovering more mental faculty than they have manifested for ten, twenty, thirty, or forty years. Several have been inmates during the shorter of these periods, and the confinement of a few approaches towards the longer. Their state, as thus denoted, may excite horror in sentimentalists at a distance; but it is really a grievous and most unjust supposition, that all or even many of them are either extremely unhappy or incapable of sundry

* Alluded to in Dr. Browne's First Report as "Porter to the Establishment."

† After a gratifying though brief manifestation of reason, this individual died on the 22d August following.

changes. The very reverse is the fact in both respects; and hence the practicability, no less than the desirableness, of a training, moral as well as physical, which, though simple in principles and of narrow range, has legitimate objects in view, and rarely quite fails to attain them. Propensities that would be ruinous may encounter a check: Tastes and aversions are discoverable on which to secure wholesome obedience: Foibles and aptitudes exercise the bodily organs and diversify thought: The merest imbecile usually possesses certain feelings in common with his associates; and, therefore, measures the sympathy bestowed on him, though, possibly, without power to express or return it: The most violent has intervals of quietness, if not placidity—clouded as they may be—through which agreeable ideas will force either an entrance or an exit; while, not rarely perhaps, a desire to receive or to impart good carries an aspect of wiser policy than a determination to do evil: Finally, and above all (for human miseries and vice are not without counterparts), however oppressive calamity, or varied its forms, a river of consolation and life sends forth streams of which the thirstiest are the most welcome partakers. Is not that truly a school which withholds from crime, puts ignorance to shame, makes man perceive he has superiors, induces fellowship among pupils, draws him into harmless though it may be unprofitable action, and places in his hands a volume that cannot be too often opened, and that is never valued enough till other sources of knowledge have passed away? * There is neither exaggeration nor enthusiasm in this appeal, which they who boast so much of reason may well lay to heart. A properly-conducted Asylum, it may safely be said, must equally delight and edify the genuine philanthropist, who, after studying its mechanism and operation, would almost infallibly be disposed to question a prevalent maxim, that derangement of mind is of necessity the greatest affliction to which his species is liable. Who dare affirm it may not be now, as in days of old, '*an healing of error*,' a teacher 'that the Most High ruleth,' an agent by which the best of all purposes is fulfilled? †

* It is heart-gratifying to observe with what attention many of the Patients, unbidden, peruse the Sacred Volume, which, in fact, is more frequently in their hands than all other books put together. Who, knowing its innate power, will not cherish the probability, that, even in this silent way, it is ministering fitness for a heavenly mansion?

† I quote the *Marginal* reading of Daniel iv. 27, which the text makes "a

"Without presuming to maintain that the Institution before me is a perfect model, I may assure those most concerned in its well-doing, that at least the rudiments and the design thus briefly adverted to are recognized and cherished in it; and that to none are they more confidently vouchsafed than to the class which the world in its wisdom may contemn, but the members of which, though forgotten by kindred, have affections to be reared and consciences to be enlightened for another state of being.

Quitting them—never without hope—I have shortly to speak of the ADMITTED. Not one of these was under 23 years of age; between that and 34, there were about eight; the greatest number consisted of persons in the middle or decline of life; and three had reached or passed 70 at entry. In no case was the disease of shorter duration than several weeks; most had been afflicted for as many months; and others were known to have exhibited some of its features for a year or upwards. A few were examples of second or more attacks, within the period of about seven years; and two, occurring in a shorter time, might be reckoned *relapses;* but in all of these, though like causes had apparently produced like effects, there were sufficient intervals of sanity, together with modifications of symptoms, to warrant the consideration of them as New Cases.

"In addition to sundry delusions, false perceptions, aberrations of judgment, extravagant sentiments, alienated affections, unfounded apprehensions, perverse suspicions, incoherence in thought and language, or absurd deportment, most of them had shown such irascibility, with a propensity to commit violent actions against themselves or others, or both, as rendered measures for obtaining security absolutely necessary, and tended ultimately to their confinement. But, however outrageous and unsafe previously to admission, these Patients usually became tranquil shortly after they were received; while, though several occasionally displayed an irritability of temper which might prove offensive and give trouble to others, not one of them aimed at suicide in the course of the year; and any evils that might arise from the utmost liberty with which they were indulged, by no means exceeded, in amount or frequency, what may be expected to take place among an equal number of sane persons.

lengthening of tranquillity." It is clear from the history, and his own words, especially in verse 36, that Nebuchadnezzar had for a time been afflicted with insanity.

"Supposing no farther advance towards recovery practicable, a change of this kind and extent would surely gratify the most interested observer; and the rather, if he knew it to have been brought on without coercion, or the employment of other means than are adopted and found salutary in ordinary diseases, accompanied with delirium. Several of these cases, indeed, having been actively treated, before arrival, with a view to allaying excitement, needed a process totally unlike what is imagined to be the routine of Lunatic Asylums. They were in hazard of sinking from mere debility, though perhaps as noisy and turbulent as ever. Rest, the warm bath, generous diet, moderate cordials—possibly opiates and anodynes, &c., according to circumstances—together with free access to the open air, the interdiction of all ascertained annoyances, obvious confidence and kindliness on the part of attendants, were had recourse to, and never so unsuccessfully as to justify another system. It is a serious mistake to believe that the most alarming of the symptoms now enumerated occurred principally in robust subjects, who could bear depletion and a lowering treatment to an indefinite amount.

"A smaller number of Patients presented themselves who required nicer scrutiny and more varied applications. They were gloomy, taciturn, shy, rather morose, or at least cold and forbidding in manner. Some appeared to be dejected or abashed, as if caught in a transgression; while others were more or less agitated and apprehensive, as if suddenly thrown among banditti. But in neither class was a malignant disposition very perceptible. Generally speaking, in these cases—not to detail other phenomena, discoverable only on medical examination—the peculiar tinge of complexion, a heavy movement with alternate fixity of the eyes, slow or laboured breathing, involuntary sighing, a restlessness of limbs, with a nearly total ineptitude for wonted occupations, were marks of a bodily condition calling for prompt and vigorous measures, ere there could be much benefit derived from moral treatment. Most of these cases could endure, and were advantaged by, more heroic prescriptions and lighter fare than would have suited the Patients mentioned in a former paragraph.

"Every reader will perceive, from these brief statements, which might easily be confirmed by the results of experience elsewhere, that a familiarity with the Practice of Medicine, in the ordinary sense of the term, is of real importance, or

rather absolutely necessary, in the Superintendent of a Lunatic Asylum. Let me add one remark strictly in relation to the great duty of such a functionary, though liable to be censured as a sort of egotistical presumption. Holding the main object of the Institution to be CURE, and everything else as subordinate, I shall never argue for detention there, when satisfied that it can best be effected or confirmed in a state of liberty; but, while I make this avowal once for all, I must earnestly repeat, what all competent judges know to be a claimant truth, that Cure becomes improbable in proportion to delay of the time at which befitting measures towards it are commenced. Friends, and the public in general, need to have this point daily and solemnly urged on their attention, be a most mistaken and cruel pride ever so much wounded.

"The number of DEATHS (3) must be considered remarkably small, and the state of Health throughout the House was peculiarly excellent, though various diseases had to be encountered during winter. The former may not again be paralleled in many years; and the latter, as is no less reasonably to be expected, will vary in accordance with it. Advanced age and drooping frames, to say nothing of casualties, portend revolutions beyond all power.*

"The Managers, well aware of the importance justly attached to the EMPLOYMENT of Convalescent or other *capable* Patients, and that counsel to this effect has been often sanctioned as well as given, must nevertheless pardon fresh application and indeed entreaty on the subject. During a portion of winter, we were nearly altogether idle, from want of materials on which to put forth our strength. The fact was easily accounted for, without blame any where. But a recurrence of the evil is to be guarded against. Even though there were no profit from our labour—and the reverse in a moderate degree is predicable of it—still, viewed as it ought to be in the light of a remedial process, this constitutes a claim on the funds not less onerous in nature,

* It may be proper to afford the means of comparison on one of the points referred to:

	No. of Cases.	No. of Deaths.
1834-5	82	7
5-6	91	13
6-7	91	9
7-8	107	6
Total	371	35

The average thence resulting are 92¾ and 8¾; whereas, for the last year, the amounts are 100 and 3.

whatever may be its amount, than one for the medicaments that may be needed. Now here I shall be quite frank and explicit. No one can or will dispute the privilege conferred on me—nay, the obligation imposed—to order such articles, however costly, as seem most appropriate to the Diseases with which I have to contend. The Vegetable and Mineral Kingdoms are at my command for this sacred purpose, and to it also I can freely direct expensive productions with which art more often gratifies sensuality. Is it unreasonable then to solicit means, of another but not less adequate and even safer kind, by which that purpose may be accomplished? The choice of them is a matter of judgment under circumstances; but the expediency, and consequently the imperativeness, are unquestionable. I forbear descanting farther on this theme; because the Members of the House Committee, from whose urbanity and conciliatory attentions I have received all the encouragement which any stranger could desiderate, are fully apprised of my sentiments; and because I feel confident that the Managers in general will effectively sustain these, as essential to the character and utility of such additions and improvements as the Asylum is about to undergo on the removal of an old associate.

"It may be deemed an evidence of the salutary influence thus pointed at, and therefore worthy of record, that two of my poor patients were engaged in field-work last autumn, at a distance from what they really considered *their home*, and unattended by keeper or guide; that they profited, in a pecuniary sense, as well as otherwise, by their industry; and that, while one is passing probation as a *weaver* in the House, the other was dismissed from it months ago, with two guineas in his purse—the fruit of rational habits, and a token of our justice. What is practicable out of doors, clearly, at some risk, it may be thought, is imitable within, *mutatis mutandis*, and that, too, under an inspection which diminishes the probability of mischief.

"A word on Recreation and Amusements. Considering the station in life and the circumstances of most of our Patients, I deem them of comparatively less moment than such occupations as imply bodily labour and even fatigue. Moreover, as every one may understand on reflection, some of them might actually be pernicious in certain cases, especially where perfect convalescence must of necessity be followed by a resumption of toils and drudgery with a view

to livelihood. But, notwithstanding objections, I have to claim greater latitude and variety in this respect than are at present conceded; while I pledge myself, in the exercise of any power, to direct and administer them with as much judgment and regard to ultimate effect as I can possibly command. It is superfluous to say that the principles of classification—as yet by no means thoroughly borne out—embrace suitable arrangements for indulgence in this particular. Of what use are books in the hands of the insane, to take an example, when the soundest mind would be driven to temporary madness by overwhelming annoyances?

"I must conclude, but not ungratefully. The Managers, besides the primary honor with which they invested me, have been pleased, by their courtesy, and what I must interpret as esteem, to make my duties less a burden than an enjoyment. In a man, not insensible of favor and good opinion, they thus secure a zeal of which he himself is truly conscious, be his deficiencies in other respects ever so apparent to those who may judge of him. To the House Committee, after what has been said elsewhere, I can only offer my heartfelt thanks—a very large portion of which, however he may value it, is due to the Chairman, Mr. Sim, whose liberality and soundness of opinion regarding the affairs of the Establishment were only not more conspicuous and efficient, because the period for its exaltation in character is still future.

"Turning elsewhere, and I will be pardoned for doing so in strict justice, a single sentence may express commendation with equal sincerity and force. All the individuals, the due performance of whose duties is absolutely and immediately essential to the welfare of the Institution, have acquitted themselves to my entire satisfaction; and in Mrs. Garden, the Matron, more especially would I say, there have ever appeared qualities, governed and invigorated by 'the great law of kindness,' which, while they lightened my own anxieties, diffused as much of peace and happiness as could be received by the pitiable subjects of our joint charge.

"The Rev. Mr. Wilson, in the exercise of his high calling as a 'bearer of glad tidings,' brought to the most forlorn—but be it not said, the most hopeless—of a race 'in common ruin lost,' has a consolation and a reward to which no testimony of mine can contribute. More humble in me,

and more approved by him, is the prayer, that the fruits of his ministration, scanty or blighted as they seem on earth, may be many and flourishing in a region beyond decay!"

"Report by the House Committee.—The very able Report of Dr. Poole, and the valuable Statistical Tables which accompany it, leave the Committee nothing to add respecting the internal condition and management of the Institution. The Report will be found to embrace every particular necessary to be mentioned for the information of the Managers, except what the writer could not with propriety state—namely, the great attention and ability with which he has himself discharged the duties of his office. The removal of our late excellent Superintendent naturally excited among the friends of the Institution a good deal of anxiety, which is now happily at an end. The Committee have no hesitation in stating that Dr. Poole has fully vindicated the high expectations which were formed on his appointment. Anxiously devoting his whole time to his charge, and combining in a high degree the necessary qualities of gentleness and firmness with professional skill and experience, he speedily won the affection and confidence of his Patients. Under his management, a system of treatment enlightened and humane, and at the same time thoroughly active and practical, has been in operation—having in view, in the first place, the cure, and, failing that, the mitigation by every possible means of the unhappy condition, of the inmates; and the results, considering the number of incurable cases, must be regarded as highly satisfactory.

"The Committee refer with pleasure to the reformation which has been effected in the Dispensary Department, by which, through Dr. Poole's excellent management, a very considerable saving has been made to the funds, without, in the slightest degree, impairing the efficiency or usefulness of this branch of the Institution. The Committee humbly submit that the Managers should immediately, on the removal of the Infirmary from the present House, take seriously into consideration the best mode of converting the upper part of the building into apartments for accommodating a superior class of Boarders, as well as for promoting further the classification of the present inmates; and they doubt not that the Institution, under Dr. Poole's able Superintendence, will continue to maintain its high character, and hold its place among the best-regulated Asylums in the country."

In relation to the last sentence of this Report, and to the "expectations" previously mentioned, it may be allowable to quote Dr. Poole's own sentiments regarding the main object for which these institutions are established. The passage occurs in the article entitled "Mental Diseases," which he contributed to the seventh edition of the *Encyclopædia Britannica* (vol. XIV., part II.); and, though brief, sufficiently denotes the varied duties imposed on a Superintendent. "The subject of *treatment* is too technical for a summary like the present; but a few observations thereon may nevertheless be hazarded. As the brain and nervous system form an important part of the animal economy, and as they are affected by all the laws which regulate it, their morbid conditions must be treated according to those principles and plans which have been found expedient and serviceable in the maladies of other portions. The peculiar functions with which these parts are endowed undergo changes which may afford corresponding indications of cure; but the latter cannot be fulfilled by agents possessing specific virtues, nor by any exclusive procedure. For unsound minds, as for fractured limbs, the boldness of quackery has hitherto announced few sovereign remedies; and, believing that there is really none, experienced physicians have recourse to measures ordinarily available in their profession. They endeavour, according to circumstances, to subdue inflammation, to allay excitement, to remove irritating causes, to counteract depression, to promote digestive action, to regulate the secretions and excretions, to maintain strength; in short, to establish good physical health, as a requisite—sometimes the only one—to the acquisition and enjoyment of mental sanity. Attention to these points must commence and terminate with the case, which, however obstinate, or seemingly hopeless, ought never to be entirely abandoned or left to the nostrums of unscientific keepers. Much more, not of a medical character, is frequently necessary, and can only be supplied in appropriate Asylums. The benefits to be derived from these are immense, and cannot be too highly estimated. Contrary to a vulgar and unjust prejudice, the features by which they are best known most powerfully recommend them. They offer greater safety than can be secured amidst the erroneous tenderness, the injudicious efforts, the distraction, and often the dreadful apprehensions of relations and friends: the retirement and seclusion, which they im-

mediately accomplish, are proved, by innumerable undoubted testimonies, to be not only conducive, but, in certain cases, necessary, to allay irritability, destroy delusions, and give full effect to professional skill: whilst, in the control which they exercise, the self-restraint which they cherish, the regularity of habits which they are calculated to generate, the occupation afforded to the strong, the repose and solace to the feeble, the direct supervision and prompt help to all —there is a combination of positive and negative advantages which not only divests Insanity of much of its horrors, by concealing or subduing them, but actually obtains a victory over it scarcely equalled by medicine in any other formidable disease."

The annexed Report will appropriately terminate these Memoranda, by showing the constitution, the management, the operations, and the state of the Charity, in all its branches, at the time of the Annual Meeting immediately preceding publication; and, having viewed these, in conjunction with what has been recorded as to its origin and progress, every reader will be enabled to judge how far the Institution, having hitherto realized early promises on a small scale, deserves to be upheld in a new and larger sphere of beneficent ministrations. There is encouragement for it in divine authority:—"Blessed are the merciful, for they shall obtain mercy."—"And THE KING shall answer, Verily I say unto you, in as much as ye have done it unto one of the least of these my brethren, ye have done it unto me."

REPORT

OF

THE DIRECTORS

OF THE

MONTROSE LUNATIC ASYLUM, INFIRMARY, AND DISPENSARY,

FOR THE YEAR ENDING 1st JUNE 1840.

LIST OF THE MANAGERS OF THE ASYLUM, &c.

JUNE, 1840.

The PROVOST and ELDEST BAILIE of MONTROSE for the time.
The FIRST and SECOND MINISTER of the Parish of MONTROSE for the time.
Sir ALEXANDER RAMSAY of Balmain, Baronet.
DAVID CARNEGY, Esq. of Craigo.
ALEXANDER RENNY TAILYOUR, Esq. of Borrowfield.
JAMES LYALL, Esq. of Gallery.
JAMES SCOTT, Esq. of Brotherton.
GEORGE FULLERTON CARNEGIE, Esq. of Charleton.
The Right Honorable Lord PANMURE.
JAMES CRIUIKSHANK, Esq. of Langleypark.
HORATIO ROSS, Esq. of Rossie.
FREDERICK GRANT, Esq. of Mount Cyrus.
Sir JAMES CARNEGIE of Southesk, Baronet.
The Reverend JAMES BREWSTER, D.D., Minister of Craig.
ANDREW FERGUSSON, do. of Marytown.
ALEXANDER KEITH, D.D., do. of St. Cyrus.
ROBERT BARCLAY, do. of Lunan.
JOHN EADIE, do. of Dun.
WILLIAM NIXON, do. of St. John's, Montrose.
JOHN DODGSON, St. Peter's Chapel, do.
PATRICK CUSHNIE, Scots Episcopal Chapel, do.
Messrs. PATRICK CRAIGIE, late of Montrose.
ALEXR. AIRTH, late of do.
JOHN BARCLAY, sen. do.
JOHN PATON, do.
GEORGE PATON, do.
JOHN BROWN, do.
ALEXANDER SMART, do.
JAMES BURNES, do.
CHARLES BARCLAY, do.
JOHN ABERDEIN, do.
WILLIAM JAMESON, do.
DAVID KINNEAR, do.
WILLIAM DORWARD, do.
Capt. ALEX. THOMSON, do.
GEORGE WILLIS, do.
JOHN BARCLAY, jun. do.
THOMAS WHYTE, do.
ANTHONY DAVIDSON, do.
GEORGE CRAWFORD, do.
GEORGE GORDON, do.
ROBERT SHAND, M.D., do.
PATRICK MASON, do.
WILLIAM SIM, do.
JOHN H. VALENTINE, do.
ROBERT MILLAR, do.
ADAM BURNES, do.
ARCHIBALD FOOTE, do.

DAVID HILL, Banker, Treasurer.
JAMES LEIGHTON, Town-Clerk, Secretary.
RICHARD POOLE, M.D., Medical Superintendent.
JOHN BALFOUR, Keeper.
Mrs. GARDEN, Matron.

ABSTRACT OF TREASURER'S ACCOUNTS FOR THE YEAR ENDING 1ST JUNE 1840.

CHARGE.

Boards of Lunatic Patients	£1345	19	1
Do. of Sick-ward Patients	4	13	0
Interest Received	165	1	3
Loss this Year	18	11	6
	£1534	4	10

DISCHARGE.

Gratuity to Mrs. James Booth				£10	0	0
Paid for Coals	£ 75	3	10			
Beef	173	4	3			
Meal	126	5	0			
Oil, Candle, Gas, and Soap	32	6	4			
Wine, Spirits, and Porter	10	9	1			
Potatoes	15	10	0			
Beer	47	19	6			
Cut Barley	15	8	4			
Medicines	17	15	0			
Bread	177	5	5			
Cheese, Butter, and Milk	109	3	0			
Hay, Straw, Grass, and Turnips	11	9	1			
Groceries	65	9	8			
Furniture and Repairs	83	16	9			
Salaries and Servants' Wages	459	19	11			
Feu-duty and Incidents	37	10	7			
Small Articles, ℔ Matron and Keepers' Books	55	12	0			
				1514	7	9
Paid for Labour in the House, above what it has yet produced				9	17	1
				£1534	4	10

(Errors excepted.)

DAVID HILL, TREASURER.

Montrose, 1st June, 1840.

DISPENSARY.

The judicious resolution of the Managers, adopted with a view to checking abuses in this department of the General Charity, and which came into operation on the 5th December 1838, has been strictly enforced throughout the year now elapsed, as may be inferred both from diminished number of patients (663 less than that of 1837-8, 158 less than that of its immediate successor), and from one of the following Tables. According to the latter, out of 418 admitted to the benefits of the Dispensary, only 10 (being chiefly cases of accident) were without written certificates testifying them to be proper objects on the ground of poverty. One consequence is a reduction of charge for drugs, as compared with expenditure during many previous years.

This branch of the threefold Institution was transferred from its position in contact with the Asylum to a portion of the New Infirmary (Bridge Street) on the 19th December last, and is open every lawful day from two to three o'clock, P.M. All intending applicants to it, excepting in cases of accidents, must be furnished with recommendations from Managers, addressed either to the Medical Gentlemen in charge of Districts, or to the Superintendent, the latter of whom is not required to visit Patients at their own houses.

Agreeably to the hope implied in the Report for the preceding year (foot note to Table V.), the Medical Officers have co-operated in endeavours to improve one of the subjoined documents—namely, by recording *the results* of Disease, under the respective heads—Cured, Relieved, Transferred to Infirmary, Died, Under Treatment. Montrose, as elsewhere observed, offers peculiar facilities towards aiding in the science of Medical Statistics. In order to doing justice to the subject, the Reporter earnestly solicits information, from all who can impart it, respecting the numbers of persons engaged in Factories, or in Public Works, the ratio they bear to the gross population, and such other circumstances as may be deemed pertinent or useful.

TABLE I.—Showing the Number, Sex, and Age of Dispensary Patients.

Months.	Number of Cases.	Sexes.		AGES RECKONED BY DECADES.										
		M.	F.	10	20	30	40	50	60	70	80	90	100	Unkn.
June	44	16	28	9	7	6	2	9	2	5	1	1	0	2
July	31	12	19	8	9	4	2	2	1	4	0	0	0	1
August	23	6	17	4	4	3	2	4	2	1	0	1	0	2
Sept.	41	15	26	10	2	6	4	2	3	3	5	1	1	4
Oct.	35	11	24	13	9	2	0	4	4	2	0	0	0	1
Nov.	63	28	35	15	12	9	8	7	4	4	3	1	0	0
Dec.	26	10	16	4	7	1	3	1	4	0	4	0	0	2
Jan.	29	11	18	2	4	10	1	6	1	4	1	0	0	0
Feb.	29	10	19	7	5	9	2	1	1	1	2	1	0	0
March	36	14	22	10	2	5	6	4	4	1	2	1	0	1
April	41	21	20	11	7	5	3	5	5	4	1	0	0	0
May	20	8	12	3	4	3	2	3	2	2	1	0	0	0
Total	418	162	256	96	72	63	35	48	33	31	20	6	1	13

TABLE II.—Dispensary Patients Arranged into Districts.

Months.	Dr. Ogilvy's.	Mr. Duncan's.	Dr. Fergusson's.	Mr. Arrott's.	Mr. Niddrie's.	Dispensary.	
June	11	8	3	8	6	8	
July	8	7	3	7	2	4	
August	6	3	3	5	5	1	
September	10	10	7	9	2	3	
October	6	13	4	9	2	1	
November	15	22	8	12	2	4	
December	7	4	2	7	1	5	
January	8	9	3	4	4	1	
February	17	2	7	1	0	2	
March	13	3	3	4	12	1	
April	16	7	6	5	1	6	
May	4	6	2	2	5	1	
Total	121	94	51	73	42	37	
Whereof—Cured	89	68	43	53	33	...	286
Relieved	8	12	4	7	3	...	34
Transferred to Infirmary	3	1	0	5	2	...	11
Died	10	5	1	4	2	...	22
Under Treatment	11	8	3	4	2	...	28
Add for Dispensary*	...	...	...	...	...	...	37
							418

* As, excepting in cases of trivial accident (the more serious being taken directly into the Infirmary), most of the Patients allotted to this department come from the Country, or need consultation only, and are not visited or even seen a second time by the Superintendent, no statement of results can be given here.

TABLE III.—Dispensary Patients,

As Recommended by	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	March.	April.	May.	Total.
Rev. Dr. Paterson.	18	15	12	27	25	43	18	22	13	20	17	5	235
„ „ Smith.....	4	2	1	1	2	4	...	1	5	4	6	2	32
„ „ Brewster.	7	...	...	1	1	...	1	...	...	...	1	...	11
„ Mr. Dodgson.	5	...	...	2	...	1	...	...	5	...	4	1	18
„ „ Barclay...	1	...	...	...	...	...	...	...	...	1	...	1	3
Provost Crawford..	2	1	...	3	1	1	...	...	...	4	...	...	12
„ Sim.....	3	...	...	1	1	7	1	2	1	6	3	7	32
Mr. J. Barclay.....	1	2	3	1	...	...	...	...	...	...	...	...	7
„ W. Jameson....	3	1	2	...	...	...	...	...	1	...	...	...	7
Rev. Mr. Cushnie..	...	3	3	...	2	...	3	2	1	...	5	1	20
„ „ Nixon.....	...	1	...	1	2	3	...	...	...	...	1	2	10
Mr. G. Paton.....	...	1	...	...	...	...	...	...	...	...	...	...	1
„ J. Burnes.....	...	1	...	1	...	...	...	...	1	...	...	...	3
„ J. Beattie.....	...	1	1	1	...	...	...	...	...	1	...	...	4
House of Refuge....	...	1	...	...	...	...	...	...	...	...	...	...	1
Rev. A. C. Low....	...	...	1	...	...	...	...	...	...	...	...	...	1
Mr. J. Aberdein....	...	...	...	...	1	...	...	1	...	...	...	...	2
„ A. Smart.....	...	...	...	...	...	1	...	...	...	...	...	...	1
„ P. Mason.....	...	...	...	...	...	1	...	...	...	...	...	...	1
„ J. Mitchell.....	...	...	...	...	...	1	...	...	...	...	...	...	1
Rev. J. Glen.....	...	...	...	...	...	...	1	...	...	...	...	...	1
Mr. J. Paton.....	...	...	...	...	...	...	...	1	...	...	...	...	1
Rev. J. Eadie.....	...	...	...	...	...	...	...	...	...	...	1	...	1
Mr. Valentine.....	...	...	...	...	...	...	...	...	...	...	1	...	1
„ G. Gordon.....	...	...	...	...	...	...	...	...	...	...	1	...	1
„ C. Barlay.....	...	...	...	...	...	...	...	...	...	...	...	1	1
Without Recom. or by Accident..	...	2	...	2	...	1	2	...	2	...	1	...	10
	44	31	23	41	35	63	26	29	29	36	41	20	418

TABLE IV.—Dispensary Patients (or their Relations) Arranged as to Religious Connection.

Months.	Establishment.			Episcopal.		Secession.	Independent.	Berean.	Baptist.	Irvingite.	Roman Catholic.	Not mentioned.	
	Old Ch.	St. John's.	Coun. Pa.	English.	Scotch.								
June.....	25	2	8	9	0	0	0	0	0	0	0	0	44
July.....	21	5	0	0	1	2	0	0	0	0	0	2	31
August.....	16	2	2	0	0	0	0	0	0	0	0	3	23
September.....	29	0	4	3	0	0	1	0	0	0	1	3	41
October.....	30	2	1	0	0	1	0	0	0	0	1	0	35
November.....	39	3	1	3	0	6	0	1	0	0	1	9	63
December.....	13	1	3	1	1	1	2	0	1	1	0	2	26
January.....	21	1	1	1	1	2	1	0	0	0	0	1	29
February.....	20	0	1	4	2	0	0	0	0	0	0	2	29
March.....	29	0	1	0	1	3	0	0	0	0	0	2	36
April.....	22	2	2	4	5	2	0	0	0	0	0	4	41
May.....	11	2	1	6	0	0	0	0	0	0	0	0	20
Total.....	276	20	25	31	11	17	4	1	1	1	3	28	418

TABLE V.—Dispensary Patients, Classified as to their Civil Employments.

	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	March.	April.	May.	Total.
Apparel, Fabricators of (male), as Shoemakers, Tailors, &c.	0	0	0	0	0	0	0	1	1	1	0		3
Artificers, in Iron, Stone, &c. (male)	1	2	1	2	0	5	1	2	2	1	1	1	19
Burdens, engaged in, as Carters, Porters, &c. (male)	2	0	0	0	0	4	0	0	0	0	1	0	7
Factories.... Flaxdressers, &c. (male)	0	0	0	1	1	3	0	2	1	0	1	0	9
Factories.... Millspinners,	8	5	4	2	8	13	4	6	4	2	5	4	65
Factories.... Pirnfillers, (both sexes)	6	1	1	0	0	0	2	1	0	1	2	0	14
Factories.... Weavers,	6	4	4	3	1	3	1	1	0	3	1	1	28
Females, employed as Keepers of Lodgings, Midwives, Sempstresses, &c.	2	0	1	3	2	3	0	1	0	0	1	1	14
Fishermen and *Women*	1	0	0	2	1	0	1	0	0	0	0	1	6
Labourers, Servants, &c. (both sexes)	4	4	3	3	3	3	3	5	3	4	4	2	41
Seamen and *Soldiers*	1	0	0	0	0	2	0	1	0	0	3	1	8
Children, Nursing, at School, &c.	9	11	4	10	13	15	5	2	8	10	13	3	103
Mothers of Families, not otherwise designated.	4	4	3	9	2	8	5	6	10	11	5	4	71
Paupers and *Incapacitated*, &c.	0	0	1	4	4	4	2	2	0	3	3	2	25
Unknown, or not stated	0	0	1	2	0	0	2	0	0	0	0	0	5
Total	44	31	23	41	35	63	26	29	29	36	41	20	418

TABLE VI.—Dispensary Patients, Arranged in regard to Disease.*

	June.	July.	Aug	Sept.	Oct.	Nov.	Dec	Jan.	Feb.	March.	April.	May.	Total.
Abscesses, Boils, &c.	2	0	2	4	4	1	0	3	4	4	2	1	27
Apoplexy, Palsy, &c.	0	1	0	3	3	3	1	2	0	2	1	2	18
Asthma, &c.	2	0	0	1	1	1	1	0	0	1	0	0	7
Catarrh, Influenza	5	2	0	4	3	9	2	3	3	6	3	0	40
Consumption, Debility, &c.	2	1	0	2	2	2	1	0	1	0	2	2	15
Diarrhœa, Dysentery, &c.	0	0	3	4	2	3	2	3	0	1	2	0	20
Dropsy, General and Special	3	0	3	3	0	3	1	0	1	0	1	2	17
Dyspepsia, &c.	3	4	0	2	1	5	2	3	3	3	3	1	30
Eyes, Diseases of	2	2	0	1	0	1	0	1	1	0	1	0	9
Female Complaints	1	1	2	2	1	2	2	1	3	0	1	1	17
Fever, Common, Typhus, &c.	6	6	5	1	4	14	3	2	1	1	2	0	45
Inflammation and Irritation.... Lungs, &c.	1	2	1	1	0	2	1	0	1	0	0	0	9
Inflammation and Irritation.... Stomach, &c.	1	1	0	0	1	1	0	0	0	0	0	1	5
Inflammation and Irritation.... Tonsils, &c.	1	2	1	0	0	0	0	0	0	0	0	0	4
Injuries.... Burns, &c.	1	0	0	0	0	0	0	0	0	0	0	0	1
Injuries.... Contusions, &c.	4	0	1	2	1	2	1	3	2	1	6	0	23
Injuries.... Fractures, &c.	0	0	0	0	0	0	2	0	0	0	0	0	2
Nervous and Spinal Affections	0	0	0	0	2	0	1	0	0	0	0	0	3
Rheumatism	1	0	0	0	1	5	0	1	0	0	0	1	9
Skin, Diseases of.. Erysipelas, &c.	0	4	1	3	3	5	0	1	2	5	1	0	25
Skin, Diseases of.. Itch, &c.	6	1	0	4	1	0	0	2	4	7	5	5	35
Teething and Worms	1	2	1	0	1	0	1	1	0	0	1	1	9
Urinary Organs, Disorders of	0	0	1	1	0	2	0	0	1	0	2	1	8
Not mentioned	2	2	2	3	4	2	5	3	2	5	8	2	40
Number in each Month	44	31	23	41	35	63	26	29	29	36	41	20	418

* As remarked on a former occasion, it aims at a convenient or simply an applicable classification, by no means one which can pretend to the dignity of being scientifically nosological.

EXTRACT from the REPORT of the DISPENSARY for May 1840.

"CHARGE FOR DRUGS THROUGHOUT THE YEAR.

In June	£1	12	4
July	0	16	10½
August	2	3	10½
September	1	10	11
October	2	7	3½
November	2	7	9
December	3	5	10
January	2	0	11½
February	1	0	5
March	1	3	5½
April	2	15	8½
May	0	13	3½
	£21	18	8½

This comprehends—

For Leeches alone	£2	8	8
Lint, Sponge, &c.	1	4	3
Lard and Sweet Oil	1	2	5½
Trusses, &c.	0	16	10
Scales, Weights, &c.	0	11	0

Lintseed, Soap, Wax, Turpentine, &c., used for various purposes, amount to about £1 10s. 0d.

Of the articles more strictly called Drugs, the following stand highest in the account:

Sulphate of Quinine	£1	8	3
Scammony	1	3	10
Cream of Tartar	1	0	0
Rhubarb	0	16	7
Castor Oil	0	15	6
Muriate of Morphia	0	14	7
Cinchona Bark	0	10	3

—These, with the previously mentioned, amount to more than half of the whole charge.

Considering the number of Patients—namely,

Dispensary	418
Infirmary	135
Asylum	96
	649,

—the expenditure on Drugs (say £23, including Spirits, Sugar, &c., used in preparing Tinctures, Syrups, &c.) seems moderate.'

INFIRMARY.

The number of Patients, admitted between 1st June and 23d November, 1839, nearly half-a-year, amounted to 34; and that between 29th November, when the New Infirmary was opened, and the end of the year (31st May), to 96,—making, together with 5 remaining, 135, as shown in the annexed Table. This *total* considerably exceeds the average since the commencement of the Institution, but was nearly equalled in 1830-1, when the number *admitted* was greater, being 134.

The new Cases (130) may be thus classified:—Abscesses, Boils, Tumours, &c., 39; Apoplexy, Palsy, &c., 7; Catarrh, &c., 9; Consumption, &c., 4; Dropsy, &c. 4; Female Complaints, 7; Fever, &c., 12; Inflammation, &c., 5; Injuries, 19; Nervous Affections, 3; Rheumatism, 3; Skin, Diseases of, 11; Urinary Organs, Diseases of, 7. The amount of Cured and Convalescent (97) may be held to bear a fair proportion to the whole, and, consequently, to evidence a degree of utility that merits public support. Of the Deaths (13), 6 were from Exhaustion, and within a few days after entry; 2 from Dropsical Affections of long standing; 2 from Pulmonary Consumption; 1 from Apoplexy supervening on another disease; 1 from extensive Gangrene of the Abdomen in a case of Typhus; and 1 from the sad effects of confirmed intemperance.

Various operations (not of the higher kinds) had to be performed, and succeeded without exception.

Nearly all the Professional Gentlemen resident in Montrose, with several from a distance (including Dr. Abercrombie of Edinburgh), occasionally visited the House during the year, and obliged the Superintendent by observations regarding its arrangements, as well as on the Cases under his charge. He was still more importantly—no less than frequently—aided by Dr. Ogilvy and Mr. Arrott, who devoted much of their time and talents to the welfare of the Patients. Indeed, it may be justly said of these two

gentlemen, that kindly becoming almost regular associates, they at once materially lightened his duties and rendered them efficacious.

The House, capable of containing above 60 beds, is now in excellent order, though not completely furnished; and, with the annexed Laboratory, to which a Waiting-Room for Dispensary Patients is attached, amply suffices for the present medical demands of Montrose and the neighbouring Parishes. No one can learn its adaptation to the relief of human misery, without hoping that the highest reward which its Founders and Patrons desire will be granted—a conviction that its object is equally appreciated and in the course of fulfilment.

Many of the Cases presented in the course of the year were peculiarly important, and would consequently be interesting to Professional men, but cannot admit of suitable details in a Report intended for general use.

The Infirmary, it is presumed, might now become, in no small degree, available to the instruction of a few youths destined for the Practice of Medicine.

TABLE showing the PARISHES to which the INFIRMARY PATIENTS belonged, and the NUMBER of DAYS they were under Treatment.

Parishes.	No. of Patients.	No. of Days.
Aberlemno	3	155
Benholm	5	91
Carmyllie	1	45
Craig	2	47
Edzell	1	9
Fordoun	1	21
Garvock	1	13
Kinnell	4	249
Logie Pert	2	73
Marykirk	6	318
Montrose	94	2012
St. Cyrus	3	75
Strangers	12	182
	135	3290

—The latter, divided by the former, gives little more than 24 as the average number of days each patient remained in the House—being considerably less than was reported, as to some previous years, by a Committee (3d January 1836, p. 9), according to which—

Year.	No. of Patients.	Gross time in Hospital.	Average stay of each.
1831-32	90	2537 days.	28 days.
1832-33	113	3174 „	28 „
1834-35	95	2589 „	27 „
1835-36	81	4033 „	49 „

While, for the three succeeding years, the averages were respectively (excluding fractions) 37, 40, and 35.

TABLE.—Infirmary.

Admitted.		In dur. Month.	Cured & Conv	Relieved, &c.	Unfit, &c.	Died.	Left.
Remaining 31st May, 1839	5						
June. Cases of							
Abscess, &c.	2						
Dropsy	1						
Female Complaints	2						
Injury	1— 6	(11)	4	0	0	1	6
July. Abscess, &c.	1						
Injury	1— 2	(8)	5	0	0	0	3
Aug. Abscess, &c.	2						
Apoplexy, &c.	1						
Consumption	1						
Nervous Affection	1						
Rheumatism	1— 6	(9)	6	0	0	0	3
Sept. Abscess, &c.	5						
Apoplexy, &c.	1						
Dropsy, &c.	1						
Inflammation, &c.	1						
Injury	1						
Nervous Affection	2						
Urinary Organs, Disorder of...	1—12	(15)	3	2	2	0	8
Oct. Abscess, &c.	2						
Consumption	1						
Inflammation, &c.	1— 4	(12)	4	0	0	1	7
Nov. Abscess, &c.	2						
Consumption, &c.	1						
Injury, &c.	1						
Rheumatism	1						
Urinary Organs, Disorder of...	1— 6	(13)	4	0	0	2	7
Dec. Abscess, &c.	3						
Catarrh, &c.	3						
Fever	4						
Injury	1						
Skin, Diseases of	2						
Urinary Organs, Disorder of...	1—14	(21)	7	0	1	2	11
1840. Abscess, &c.	4						
Jan. Apoplexy, &c.	1						
Consumption	1						
Fever	3						
Inflammation, &c.	1						
Injuries	3						
Skin, Disease of	1						
Urinary Organs, Disorder of...	1—15	(26)	8	1	1	4	12
Feb. Abscess, &c.	5						
Fever	2						
Injuries	3						
Skin, Disease of	1						
Urinary Organs, Disorder of..	1—12	(24)	10	0	0	0	14
Mar. Abscess, &c.	6						
Catarrh, &c.	2						
Dropsy, &c.	2						
Fever	1						
Female Complaints	3						
Injuries	4						
Skin, Diseases of	2—20	(34)	14	3	2	1	14
Apr. Abscess, &c.	3						
Apoplexy, &c.	3						
Catarrh, &c.	3						
Female Complaints	2						
Fever	1						
Inflammation, &c.	1						
Injuries	3						
Skin, Diseases of	4—20	(34)	21	2	1	2	8
May. Abscess, &c.	4						
Apoplexy, &c.	1						
Catarrh, &c.	1						
Fever	2						
Inflammation, &c.	1						
Injuries	1						
Skin, Disease of	1						
Urinary Organs, Disorders of..	2—13	(21)	11	1	1	0	8
							Remg
Total No. Treated, Discharged, & Died,	135		97	9	8	13	8

ASYLUM.

ADMITTED.			DISCHARGED.			DIED.					LEFT.	
Remaining, 31st May 1839,	M. 38	F. 32—70	Cured & Convalt.	Remov.		Con-sum.	Exhd.	Epil.& Paral.	Suic.			
			M. F.	M. F.		M.	M. F.	M.	M.		M.	F.
June	1	1— 2	4 0—4	1 0—1		..	..	..	..		34	33—67
July	3	0— 3	..	..		..	..	1	..	—1	36	33—69
August	3	1— 4	..	1 0—1		..	1 0	..	..	—1	37	34—71
September	0	2— 2	1 0—1	..		..	..	..	..		36	36—72
October	0	1— 1	..	..		1	0 1	..	..	—2	35	36—71
November	1	1— 2	1 2—3	..		..	..	..	..		35	35—70
December	1	1— 2	1 0—1	..		..	..	..	..		35	36—71
January, 1840	1	0— 1	..	..		..	..	..	1	—1	35	36—71
February	0	2— 2	..	0 1—1		..	..	1	..	—1	34	37—71
March	1	1— 2	..	..		..	..	..	..		35	38—73
April	2	1— 3	2 2—4	..		..	0 1	..	..	—1	35	36—71
May	2	0— 2	1 0—1	..		..	1 0	1	..	—2	34	36—70
No. of New Cases	15	11—26	10 4—14	2 1—3		1	2 2	3	1	—9		
Tot. No. under Treat.	53	43—96	Cur. &c.	14	Remov. 3				Died .. 9		Remaing. 70	

A Narrative or Memoir, regarding the origin, progress, condition, and interests of the Asylum, being now published, and which, considering its benevolent purpose, the friends of the Charity may reasonably be expected to patronize, the following pages are mainly occupied with a statement of the Cases admitted during the year just elapsed. While several of these present instructive features, and therefore, though few in number, tend to elucidate kinds and degrees of Insanity, the whole, taken in conjunction with previously recorded examples still under treatment, will fitly denote the nature and amount of duty which the Medical Superintendent and his Assistants have had to discharge. Some general observations will be interspersed through, or find a limited space after, such a survey, which, it is proper to remark, proceeds in the order of entry—the Patients themselves being designated by numerical figures, to avoid all hazard of uneasiness on the part of relations.*

* Reference is made above to "Memoranda respecting the Lunatic Asylum, Infirmary and Dispensary of Montrose, &c.," sold for behoof of the Charity.

No. 1. A Male, aged 26—re-admitted after a short and unsuccessful trial of liberty. Till eighteen months before his first entry, he had been a quiet, industrious, good-natured lad, frugal in his habits, perfectly sober, anxious to make money, noted for kindness to his aged parents. About that period, without discoverable cause, he became restless and unsettled in spirit, left off work as a ploughman or country labourer, complained of strange thoughts crossing his mind, imagined he was haunted by witches, and spoke of being ill in bodily health; but, for a time, he manifested no violence of temper, was generally inoffensive, though easily discomposed, and, still residing under his father's roof, occasionally attended school, with a view to qualifying himself for the functions of an overseer or upper farm-servant. Ere long his mental disorder increased, and assumed a new aspect, especially in regard to the affections and disposition. Thus, besides exhibiting a great deal of cunning, with equal irascibility, his love for those to whom he had been most attached was changed into dislike and actual hostility; while his behaviour to others, though not totally irrational, indicated want of self-control and dangerous propensities. Having, in consequence, struck his parents, turned them out of doors, threatened to burn their house, and altogether occasioned much alarm, he was placed under the care of a friend, whose authority, without coercive measures, served to check him, but had no remedial influence. At this time, and during many months afterwards, he seemed to be perpetually discontented and unhappy, by his own account, for a very whimsical reason, namely, that he did not possess "The Miller's Word," "The Freemason's Secret," "The Second Sight," without one or other of which—and he anxiously desired all of them—he believed it was impossible for him, or any one else, to prosper in the world. No wonder his solicitations to have such important mysteries revealed were as urgent as his disappointment and vexation were excessive when denied them.

Derangement, thus unequivocally set in, advanced rapidly under the absence of requisite aid, and in a state of undue freedom. Latterly, his bodily health became much impaired. Almost instantly on admission he showed symptoms of Typhus, and, in consequence, was removed to private lodgings; whence, perhaps rather prematurely, he returned to the Asylum, weak, pale, emaciated, with obvious threatening of pulmonary consumption, but nevertheless

tranquil, placid, submissive to a degree of childishness, and, excepting the absurd rage to be a *craftsman*, which augmented as he seemed hastening to the grave, in no respect unreasonable. His progress towards physical strength, though slow, was satisfactory; and, as his docility kept pace with it, while the chief or only impatience he now displayed was that of losing time, I advised the moderate resumption of his former employments. As already implied, the experiment failed. Though greatly improved in health, his aversion to work continued; he insisted on being illuminated and enriched as pertinaceously as ever; arguments and entreaties availed nothing in the face of a passion that deterred the keenest adepts from enlisting him; he became no less troublesome and unsafe to parents and neighbours than at a former period; and, in short, a new commitment was absolutely demanded.

His present state could not have been expected, because quite unlike any to which he appeared tending. Robust, strong of limbs, ruddy complexioned, inclined to be plethoric, fit for any labour were there but willingness to engage in it, he might be chosen with alacrity as a pioneer or even a Lifeguard's man; and yet, such are his indolence and dogged perversity—couched, curiously enough, under a pleasing countenance, and, which is equally remarkable, blended with a softness of manners and address that verges on fawning—not one Patient in the House either gives more trouble or can be less prudently trusted to his own volition and resources. In former days, beyond a doubt, he would have been subjected to chains and the whip, till delusions terminated in fatuity, and a brute was substituted for the man. By a different, and really easier—not to say much more agreeable—treatment, I hope to see him entitled to wonted society, because fit to perform some of its varied duties. Already, I conceive, the *arcana*, of which he had been so long and earnestly in quest, have ceased to charm him; he smiles derisively when they are mentioned, as if they merited no attention; is somewhat mortified by any allusion to his predilections in their favor, and readily admits that fortunes have been and may be made by those to whom they are entirely unknown; farther, it is possible to coax him into useful exertions, while his desire of gain has revived; and I may add, in evidence of more than one promising circumstance, that, besides contributing heartily by his muscular vigour to the erection of a wooden stage or

scaffold in one of the airing grounds, from which the surrounding country, and especially the operations at the New Dock, may be viewed, he avails himself of it in a manner such as to indicate a longing to be among those—one of them a fellow Patient—whom he observes to be thriving by their daily labour.

In this case, as the professional reader will perceive, *monomania* has both revolutionized an entire character and prolonged its existence through totally different conditions of the physical system. I may remark that his head, though not specially disproportioned, is below the average magnitude at the same period of life.

No. 2. Aged 32, a Mother and Widow, of small stature, delicate in form and features, rather pleasing and gentle as to manners, labours under great confusion of thought, and has sundry erroneous notions, which, together with general imbecility of intellect and a timid spirit—all of several years' duration—render her incapable of self-government. But, on the whole, she is quiet, can be induced to undertake some of the minor departments of needle-work, has few or no vicious propensities, and appears to be perfectly contented in her present abode, more especially, it would seem, because permitting easy access to her mother, one of the Patients, whom, notwithstanding marked difference in character, and occasionally great repulsiveness of temper, she regards with childlike fondness. It may be mentioned, in proof of this amiable attachment, while illustrative of her own simplicity, and the dangers to which she was exposed, that, having abruptly quitted her former place of residence, a private house, many miles distant from Montrose, she travelled all night on foot, in a garb equally fantastic and unsuitable, for the sole purpose of visiting her parent at the Asylum. Her singular appearance there next morning, the nature of her conversation, which was wildly extravagant, and the resolution she had formed to go back immediately in the same manner, though already insulted by untender spectators, suggested the humanity of detaining her till proper arrangements should be made with the Parish to which she belonged. The result, apparently every way agreeable to her, was regular admission as an inmate.

No. 3. Male, aged 27, partly educated for the Medical Profession, and, during his sane state, engaged in a branch

of it abroad; whence, being incapacitated by derangement of mind, a near relation acted as his guardian throughout a long voyage. At the time of admission, immediately on arriving in this country, the malady was in its fourth year, and had undergone several changes. In the early stage, reason, though much disturbed, was by no means quite upset. Enfeebled, and somewhat rapidly losing supremacy, it could be brought into service on a few topics, rather trifling in kind, but failed to subdue or banish the suspicion that he was undervalued by his associates, and the apprehension of certain evils, probably connected with political circumstances then in progress around him. By and by, intellectual imbecility, varied by fits of passion, which were easily excited, and therefore frequent, was discernibly on the increase: he became helpless, seemed void of every mental faculty, for the space of six weeks refused or was unable to hold converse with a human being, and, taking not the slightest interest in any external objects, might be said rather to vegetate than live as a man. Latterly, this lethargic automaton-like condition had been in a degree diversified by expressions of will and inclination, if not enlivened by gleams of judgment; but, though resuscitation had thus commenced, it was feeble and slow, besides being liable to interruption from the depressing results of those commotions to which he still yielded, both on particular occasions and without appreciable cause.

I found him, on entry, diffident, reserved, taciturn, averse to examination and questioning, but neither unruly nor dejected. He required medical treatment, with a view to correction of the alimentary canal, probably disordered by diet at sea. Improvement in this respect soon followed, and has had agreeable adjuncts or consequents. Though shy, fonder of solitude than company, and irritable or morose at times without justifiable grounds for being either, he has gained frankness of manner, tolerates or even shares in conversation, is exceedingly obliging and anxious to please, shows an inclination to be employed in little mechanical works, for which the necessary tools have been supplied, with a taste for drawing, as well as some mathematical skill, and is so far tractable that, besides other indulgences safely extended to him, he can be permitted attendance on Church out of doors, with occasional visits elsewhere. Having thus far got round towards mental sanity, and being now in perfectly good bodily health, I deem his restora-

tion to friends and usefulness of life a very probable event, though such as it would be most injudicious to attempt hurrying forward, without dread of relapse or evidence of greater and longer-sustained self-control than he has yet exhibited.

No. 4. Male, aged 45, a woodcutter, formerly healthy, and always of a peaceable disposition, but, for nearly thirteen months, laid aside from work, in consequence of bad health; and, during two years, requiring "to be looked after" by his friends, who observed him to become childish, with intermediate fits of anger, for which no cause could be assigned. Of late, he was free from disturbance, seemed invariably placid and contented, but remained almost constantly in bed, and evidently drooped in mental as well as bodily health, without either lucid interval or effort towards rallying. At entry, he had lost all power over certain sphincters, and was truly a pitiable object throughout. He abode with us only a few days, when, contrary to my advice, his wife removed him—truly expecting his death, which, as reported, soon afterwards relieved her from anxiety.

No. 5. Male, aged 54, of whom his former medical attendant was kind enough to furnish a special report, from which the following particulars are extracted. In general good tempered, but subject to frequent fits of passion when not humoured. Addiction to ardent spirits the cause; been more or less under the disease for four years; it was ushered in by attacks of Delirium Tremens, after recovering from which, the functions of both mind and body were depressed, and after a time complete fatuity occurred. The Patient imagines himself to be taken up with great men and great schemes, though in humble life and unfit for exertion; has an unconquerable love for spirits, and violent fits of anger take place when these are refused. The disease seems stationary. Since the first seizure, there have been frequent lucid intervals, but none since recovery from the last attack, 8 months ago. According to the same authority, the Patient had no tendency to suicide or to hurt others, and none of his relations had been insane. My own notes, a fortnight after admission, are scarcely more favorable:—He is of rather large make, somewhat jolly, with florid complexion, eyes a little blood-shot, face swollen or bloated; he walks badly, as if only slightly re-

covered from universal palsy, and has swelled legs. His memory is impaired, and other faculties, though not gone, are confused; but he speaks intelligibly as well as abundantly, and is in all respects easily managed. I put him under aperients and diuretics, from which he has evidently derived great advantage. His case, though far from promising, is by no means hopeless. The variety of persons seems to amuse him; and, of his own accord, he picks oakum, or otherwise employs himself in a most harmless manner.

At the distance of some months, again, my memoranda are *verbatim*:—Has had slight excitements occasionally, but is easily controlled. He sometimes pilfers, apparently without consciousness of transgression, which, however, is apt to bring him into scrapes with other Patients, one of whom lately knocked him down.

I record this last fact without hesitation, but not without some commentary. Events of the kind are exceedingly rare among my Patients—indeed more so, I am apt to think, than among many assemblies consisting of an equal number of sane persons, but who have no one serious bond of union; and this circumstance must be deemed rather extraordinary, because our Asylum, being less perfect in Classification, especially of Males, than could be desired, employs fewer attendants than the amount of its inmates may seem to require. Every visitor, indeed, must marvel how, as often happens, a single keeper can contrive to preserve, what are almost invariably apparent in it, the peace, order, good humour, and mutual kindliness of thirty maniacs, not one of whom is subjected to bodily restraint in any form or degree! The truth is, most fortunately, the principle of benevolence, now fairly systematized as our best policy, obliges, or, let me rather say, induces that responsible individual to rely on, and therefore, sedulously to cultivate, those fragments of understanding, will, and moral feeling, which survive the ravages of disease. He could not possibly succeed without their aid, which, again, is proportionate to his own mildness and sagacity in eliciting them.

No. 6. Aged 84, a Female, never married, lately a lodger in another public establishment (not a Lunatic Asylum), where, soon after reception, she was discovered, or, at least, suspected, to be insane; and where, at all events, her infirmities proved troublesome. Most probably, among

numerous associates—many of them little children, and few or none equally venerable by age—she experienced annoyances beyond her modicum of patience and good temper; while, though one of the insinuations which she had to encounter—namely, that she was a witch—might enhance her self-importance, seeing she had acuteness enough to value what gives influence over other minds, the title itself was not acknowledged by her with corresponding gratitude. The consequences were fretfulness, irritation, unbecoming hastiness of temper, and no less vehemence of speech—all interpreted as signs of derangement, and leading eventually to her removal. She soon expressed great satisfaction at her change of residence, and, though very peculiar as to opinions, language, and disposition, is quite the reverse of an unpleasant or intractable Patient—showing kindliness of feeling, a due sense of any favors, no small vivacity of mind, with an archness of humour, as well as a volubility that afford amusement, and a complete obedience to all necessary regulations. On the favorite topic of her own death, she is apt to descant in a manner not exactly consonant with sobriety of thought—being much more anxious respecting apparel for the grave and a decent funeral than impressed with the awfulness of those spiritualities which are above and beyond them.

No. 7. Male, aged 21, of slender but not feeble make, florid complexion, pleasant countenance, remarkably gentle disposition, and of very sober habits. About four months before admission, he manifested incoherence of thought, and equal strangeness of language: had no perceptible disease of body previously or at the time, but was supposed to have been injured in health by fishing in cold weather—his feet being frequently and long wet during that occupation. At first, but not latterly, he dwelt much on scriptural subjects in conversation; and, though unacquainted with their tenets, exhibited great alarm about the Chartists. On being thwarted by his mother, he sometimes struck her—seemed to dislike his father, but was particularly fond of one of his brothers—was not known to have ever attempted suicide, but threatened to dash his head against a wall if taken to the Asylum. None of his relations had been insane. Soon after the mental disease commenced, he laboured under diarrhœa, for which he had certain remedies prescribed.

I follow out the case from my memoranda. About two months after entry:—Leeched on the temples, got smart purgatives, warm bath, &c., which, by his own account, relieved him of headache. Appetite become moderately good—he continues to take exercise freely, but is dull and disinclined to work, though occasionally for a short time at the loom. Is quiet and silent, though not sullen—has some delusions, but rarely displays them. Considering all circumstances, and especially the dilated state of his pupils, I apprehend a tendency to serious organic affection of brain.

Afterwards:—For many weeks troubled with cough, pain of side, &c., indicating great delicacy of chest, and almost threatening pulmonary consumption; but these symptoms have materially abated under medical treatment —and, as he has improved mentally of late, I hope soon to sanction his removal.

Soon thereafter:—Taken out by his friends, but, perhaps, rather earlier than was prudent.—At the distance of months, he was reported to be keeping well in all respects.

No. 8. Male, aged 20: of sanguine temperament, sober habits—industrious and peaceable: a labourer at present, but for some time worked at a foundery, where he was hurt on the head by a fall—since which he has been subject to epileptic fits—but, on the whole, freer from these after marriage, about four months previous to admission, till, having received a severe injury on the hand, and being laid aside from labour, they again became frequent; at the same time he was observed to be restless, showed violence by striking persons, spoke incoherently, and seemed to dislike his mother. He had retching and vomiting a few days before entry, when his face got much flushed, as it continued to be: had been hand-cuffed to prevent mischief, and treated medically, but in the simplest manner. When brought to the Asylum, he appeared to be in a fit, which was followed by stupor, with heavy breathing and a feeble pulse.

Under suitable management, he rapidly improved—his hand healed kindly, though the arm remained somewhat stiff; and, with only one fit, slight and of short duration, he became so well in all respects as to be entitled to discharge, three weeks after reception.

I have had frequently the pleasure to see him since—working diligently, in good health and spirits.

No. 9. Male, aged 18—a sort of labourer or farm-servant—of whose history only a few particulars could be learned, and these were deplorable enough. He was an orphan, friendless, had been quite neglected, or rather harshly used: without known cause, he suddenly became feeble and stupid—to all appearance was perfectly fatuous, as he neither gave token of feeling, nor noticed any object whatever. On admission, he could barely move a step when drawn and supported—he maintained unalterably, by will, any position in which he was placed—his eyes stared fixedly and uninfluenced by variety of objects—sounds made no impression on his ears—it was necessary to force open his lips that he might receive food, which he swallowed without mastication, and seemingly without consciousness—speech, sense, mental faculty of any kind, had forsaken him. In a word, he was perfectly cataleptic; and, judging from the extraordinary enlargement of his pupils, with other circumstances, the opinion that he had, or was threatened by, hydrocephalus, seemed quite warrantable.

I put him under brisk cathartics, applied stimulants to the spinal column, had recourse to warm bathing, watched and promptly treated every change of symptom. Ere long, he was able to take hold of a spoon with which he fed himself, could walk three or four paces at a time, assisted in adjusting his own clothes, and evidently observed what passed around him, but made no utterance whatever, and, if he heard the request—to put out his tongue, failed to comply with it. It was encouraging, even though several weeks had afterwards elapsed, to learn that he was chief agent in getting out of bed and dressing himself,—to find him placidly seated on a bench among the oakum pickers, whose movements he imitated with tremulous fingers and incalculable product,—to perceive that he was gratified by little attentions, and, when invited, would follow another like one of the domestic animals, but without its speed,—to conjecture, though barely on the evidence of monosyllables delivered in the feeblest tone, that some rational faculties were in abeyance, not extinguished. The hope of his ultimate recovery waxed into assurance, when, besides handling a spade in our garden, and correctly though slowly fulfilling any small task allotted to him there or elsewhere, he sought recreation in extended walks, relished the company of some fellow patients, increased the number of his oral signs, made allusions to remembered events, and

smiled with delight when promised an early restoration to the blessings of freedom on his native hills. If any thing could have added to my own happiness in witnessing such progress, it was the perception of good moral qualities in this youth—and they kept pace with the new development of his intellectual powers. Altogether, then, having failed in expectations from his Parish, though humanely aided by the inquiries of its Clergyman, and knowing well the peril of a relapse, should a state of anxiety and doubt as to his future maintenance supervene, I personally solicited and obtained employment for him at a public work, as, first, a trial preparatory to dismissal; and, secondly, supplying the means by which, if a change from it were necessary, he might be enabled to seek out a permanent occupation for himself. The experiment was quite successful. In the course of about a fortnight from its commencement, he resolved to persevere in the same sort of labour, and gratefully took leave of us, carrying with him my best wishes, and, still more potently, the virtues of a really estimable character.

A recovery of the kind is most gratifying amid numerous examples of disease, in which nothing but a contrast is reasonably to be expected. I cannot resist the additional pleasure of being enabled to mention, that, subsequently to discharging this poor but deserving lad, his Kirk-Session, on a representation by the worthy Pastor, authorized me to 'set him fairly a going in the world,' by purchasing all the clothing of which he stood in need.

No. 10. An unmarried Female, aged 46, irreproachable as to morals, and of pleasant temper, though liable to irritations: was slightly paraletic on one side, subject to epileptic fits, and, unhappily, had a schirrous mamma—for the last of which ailments she was sent to the Infirmary. Under all circumstances, neither I nor the Medical Gentlemen consulted thought proper to advise any operation for it, to which, indeed, she and her friends were opposed. Being obviously, however, of weak intellect, unable to provide for or attend to herself, while, aside from the local affection, her bodily health required treatment, it was agreed to consider her as an Asylum Patient. She improved in sundry respects, appeared content though occasionally restless, and was easily managed. But, contrary to my opinion, she was removed to private lodgings, where, having

become asthmatic and otherwise ill, death soon terminated her sufferings.

No. 11. Female, aged 26, of stout make, florid complexion, rather large but not uncomely features. Being observed on the streets in a state of manifest derangement, at first supposed to be the effect of liquor, she was taken up by the Police Officers, and lodged for several hours in their Hall; whence, on ascertaining the truth, a Magistrate directed her removal to the Asylum—she clearly needing some restraint and medical treatment. No account of her could be obtained, farther than that she had come from a great distance either with or in quest of a young man, who, it was presumed, had seduced and abandoned her. She wore moderately decent attire, and had a few shillings in her pocket, but no document to tell her name or history; both of which, however, though with some variation, were incidentally learned afterwards. I found her in a condition of violent mania, which persisted for several days; when, by active treatment, but without bleeding, she sobered down, and, though greatly depressed in spirit, became perfectly rational. Eventually, as the suspicion of pregnancy had augmenting evidence, and the Asylum is not precisely an Infant School, her removal from it became every way expedient. After giving birth to a still-born child—an event which, in addition to various painful circumstances, distressed her greatly—she repeatedly visited the matron in a state of entire sanity, with equal gratitude; and, fortunately, through the kind exertions of that lady, obtained an employment by which she supports herself in a creditable manner.

No. 12. Female, unmarried, aged 64. "Timid and infirm: Cause not known, but existed from infancy: Malady stationary: Restless and unhappy, but harmless: No inclination to injure herself or others, and not excited by any known object: Hereditary taint not known: Little medical treatment has been adopted, except regulating the general health: Was a short time in the Montrose Asylum, upwards of forty years ago, since which time she has resided with the family at ——." Such is the brief but nearly sufficient statement transmitted with this patient. An oddity at best, and mainly a noisy trouble at worst, she requires the entire services of an attendant, tenaciously maintains exclusive

right to her own parlour and all other privileges bargained for, has an admirable and ever ready appetite, grumbles or *yearms* almost perpetually, but without either rhyme or reason—indeed, more from bad habit, or because such rhetoric seems to have long been persuasive with indulgent guardians—than from real uneasiness in mind or body,—and would merit boundless pity as a helplessly weak creature if the means of gratification were not at her command; but then, possibly, she might be happier, as well as more agreeable to others, from the absence of querulous desires. I am convinced that a little firmness of management—she must, however, always be most mercifully considered—has increased her comfort, while her health has improved under it; and, happily for all concerned, the aspect of, or even a call for, "the muckle lady in black,"—meaning Mrs. G. of whom she stands in awe—is usually quite adequate to rectify any disturbance arising from her caprices and unreasonable importunity. At entry, she cried incessantly for laŭdanum, and was said to need the strongest cathartics to counteract one of its effects. But a denial of the former superseded all occasion for the latter.

No. 13. A Wife and Mother, aged 32, formerly an inmate, but, as was soon discovered, imprudently removed by her husband before mature convalescence. At first admission, her illness was dated from the birth of a child, though the change in manners was so slight as scarcely to attract observation. Soon afterwards, no doubt of her state could be entertained. She became exceedingly violent—broke every thing within reach—shut herself up, seemingly for the purpose of being uninterrupted in destructive acts—and paid no attention to her infant charge. On the abatement of such paroxysms, she was lethargic, and kept in bed, generally fixing her eyes on the ceiling, but answered questions somewhat correctly. After entry, she behaved decorously on the whole, but was most discontented and suspicious—seeking opportunities of escape, involving companions, and once attempted suicide by hanging.

For many months before re-admission, she was unsettled in the extreme—careless of husband and family, to whom she gave unceasing vexation—and, though not altogether so violent as formerly, resisted every means that kindliness and judgment, without coercion, suggested for her welfare. A total change of behaviour—probably or certainly not of

character or disposition—has marked her late residence in the house, where she appears to be quite contented, offers no annoyance, frequently or steadily engages in small matters, and is quite willing to remain.

No. 14. A Male, aged 37, of whom his last medical attendant wrote as follows:—Gentle, sedate, studious, and retiring (previously to being diseased): Small-pox the supposed cause: more inclined to retirement than formerly: is usually quiet and inclined to silence; but, when excited, is noisy and turbulent—at times abusive: Excitement increasing: no completely lucid interval: no tendency to self-destruction: previously to excited intervals, is inclined to tear and destroy his clothes, &c.: has never been observed to cherish any malicious design: the friends state that no hereditary predisposition can be traced: duration of the malady, nearly ten years.

I soon learned farther particulars—and, especially, that the Patient was much subject to epileptic fits—before, during, and after which, he required great care and sundry medicines. He was in good bodily health at admission, and, though shy at first, took well with his new situation. A few fits have occurred since. They were distinctly marked, but not of long persistency. His faculties are sadly impaired or depressed—not quite gone: he takes exercise largely of his own accord, but little amusement: I have heard him reading the Bible in a low, subdued tone of voice —and yet in a manner that struck me as touchingly impressive. Probably his own emotions were in correspondence—but, in the absence of conversation, to which he is averse, or of which he is little capable, these could only be conjectured. He is on the whole easily managed, and obtains much sympathy from a few neighbours—companions they can scarcely be denominated.

No. 15, Female, aged 49, a relapsed Patient, having been discharged two years ago, but, taking again to an abominable vice, the cause of former derangement, needed restraint as much as ever: Originally, it is recorded, of a moral and respectable character, with energy and talents enough to be highly useful in a domestic sphere, she was degraded by habitual intoxication, and then became a perfect nuisance to all around her. During her first residence in the Asylum, she gave much trouble by unruliness of

behaviour, obscene language, excessive high-mindedness, malicious insinuations, and plotting among the inmates—in short, was a perfect mar-peace, and the more efficiently such, because of the naturally strong faculties which she had abused.

While under my care—however the fact is to be explained—her conduct was every way praiseworthy, and manifested not a single trait of insanity. She proved of some service in the house, had for a short time the nightly charge of another patient, and was pleasantly as well as intelligently conversable. Doubtless, having abundance of good sense, and knowing by experience that rational submission was the only passport to liberty, she practised self-control, with a view to obtaining it. The reward could not be justly or legally withheld beyond a moderate but due period of probation. She quitted us, avowing much gratitude, and expressing the best resolutions. I confess entertaining a hope of their fulfilment, though aware how seldom the proclivity to ruinous indulgence, especially among females once overcome, is totally annihilated, be its suspension ever so decided and encouraging.

No. 16, Male, aged 52, of medium stature, rather slender make and lean, with sallow complexion, and an expression of care or anxiety verging on melancholy, well known to be of steady, sober, religious habits—kind and attentive to wife and family—trusted deservedly in an important and useful office. He had been afflicted with dyspepsia and biliary disorder for several months, during which, too, more than wonted occupation, with increased responsibility, devolved on him. In consequence, apparently, his spirits got exceedingly depressed, and, appetite with digestion failing, as also sleep, he became very feeble, somewhat querulous, still more desponding, restlessly solicitous about his duties, but unable satisfactorily to discharge them. Then, various doubts and apprehensions as to his own character, moral and religious, assailed him; they ran into gloomy convictions, remorse, horror of mind, dreadful forebodings, despair of salvation: he could listen to the precious declarations of the Divine Word, admit their truth and efficacy as applicable to mankind in general—even to the chief of transgressors—but, in his own case, they ministered only condemnation: when pointedly interrogated, he acknowledged that the Enemy of Souls was sometimes

busy in urging him towards self-murder; and that, if the goodness of the Almighty did not interfere, he dreaded being one day prevailed over to commit the crime. So far as was discoverable, on all subjects, not excepting the most solemn, he reasoned correctly, and used appropriate language; but, declining in interest as to ordinary concerns, while there was an augmentation of natural reserve and taciturnity, his judgment equally as his feeling seemed lethargic and beclouded. That it could not be altogether sound, or that, on one point at least, it erred exceedingly, was quite plain—inasmuch as the deeds with which he charged himself, so far from amounting to what is absolutely inconceivable—a guiltiness beyond the reach of sovereign grace—were too trivial to merit human censure. For example, in the course of many years' service, with goods under trust of a value almost beyond his ability to calculate, he had appropriated, without leave or acknowledgment, a refuse or waste article, the price of which, well sold, might be twopence! And, in this way, on this account—such was the tenderness of his conscience—such *is* the perverting energy of madness—the unhappy man demonstrated himself to be a deceiver and a hypocrite, to have forfeited the esteem of brethren, and sinned above catholic forgiveness.

Suitable treatment of his bodily disorders had an obviously beneficial result, but, his mental condition remaining unaltered, or rather becoming worse and obstinate, while a few hints and the peculiar expression of his eyes betokened latent mischief, he had to be removed to a place of safety. In a few days at the Asylum, he assumed an air of comparative placidity, and undertook a little work by way of amusement, but kept much alone, was shy and incommunicative. My own suspicions of his malady and its probable termination, besides being mentioned to friends, so far from having abated, were fully imparted to those who had direct charge of him. I am satisfied that the injunctions founded on them had strict observance; but, unhappily, they proved vain. In a manner the most artful —never for a moment thought of, scarcely even afterwards susceptible of complete explanation—with a cunning that could not be detected, and a persevering dexterity that had little less than physical impossibilities to master—he effected destruction in a nearly empty bed-room, without the smallest noise leading to interference. It is a singular fact that a piece of mechanism, intended as a security against

such an evil, and for years found sufficient, was made available to his resolute and literally pains-taking purpose.

Events of the kind, to which all Lunatic Asylums are liable, have not occurred in the Montrose Establishment above three times since it commenced, in 1782; whereas, to take an example, without in the slightest measure intending disparagement, it appears from a Table in a late publication, that, in less than twenty years, out of a number of Patients not much greater, the instances of suicide amounted to *seven*.*

No. 17. Male, aged 50—reported to have been "good-tempered and well-behaved, except when under the influence of drink: long addicted to large quantities of spirits: hypochondriacal for twelve months, particularly after having had an attack of convulsions, and being obliged to discontinue the use of alcohol: now, and for two weeks past, in a state of suicidal monomania, with despair of salvation: first attack: attempts to destroy himself, but not to injure any one else: no hereditary predisposition."

The Patient was of small stature, well built, though not robust, had a sallow complexion, with manifest tokens of impaired constitution. Nevertheless, he conversed rationally on various topics, had an air of shrewdness, nicely gave as well as received a joke, and seemed to be resolved on making necessity a virtue, by submission to the unavoidable circumstances in which he was placed. One supposed fact —readily declared—lay at the foundation of any disquietude or apprehension under which he laboured: he had inadvertently entered into a compact with the Devil, who, besides nocturnal visitations by way of preserving a sense of it, retained a document in proof of title to possess him when no longer a denizen of earth. Most fortunately, as turned out on trying the cause before his own judgment, this deed had not been agreed on, signed and delivered, in the presence of witnesses; and, consequently, it might be disputed in regard to validity, if ever produced, which it certainly was not. Arguments to this effect, especially as he had resolved on being quit of a bad bargain, whenever it could be safely broken, satisfied and consoled him. In course of time, though whimsical and capricious, he improved both

* "A Lecture on the Management of Lunatic Asylums," &c., by Robert Gardiner Hill, &c. &c. Appendix D. Of these, 4 were by *hanging*, 1 by *strangling*, 1 by *burning*, and 1 by *knocking the head against the wall*.

in bodily health and mental vigour; the addresses of his arch co-partner became fewer and less onerous; he took the liberty of calling them in question—denying their relevancy—altogether neglecting them as ridiculous; and, though still a prey to hypochondriacal notions regarding his health, got divested of any delusion characterizing insanity. He was consequently indulged to the full extent of his own reasonable desires, often attended church under no other arrangement than would be suitable to a person whose infirmities needed companionship, paid visits to old acquaintances, or took opportunities of witnessing such scenes as afforded him pleasure, and has shown himself fit for any ordinary society that does not hold out inducements to resume a habit which would infallibly end in his moral as well as his physical ruin. I shall soon have to declare the legal necessity for his emancipation.

No. 18. A Girl, aged 17, low of stature, but short and rather plethoric, with a dull or somewhat repulsive expression of countenance: is subject to epilepsy, and has lately complained of being troubled at night by frightful figures, some of which emit strange sounds, as if in anger at her; and, in many cases, she has manifested great obstinacy of temper, with a disposition to be violent. Hereditary tendency to derangement may be suspected. By active medical measures, intended to remedy certain physical disorders and irregularity, she improved perceptibly in health, and got free from nocturnal annoyances, but was most imprudently withdrawn from the Asylum before her restoration in any sense could be pronounced.

No. 19. Aged 60, married, but without children: remarkable for benevolence, and in all respects a most exemplary character: some months in bad health, with low spirits, and entertained the notion that the affairs of her husband and all other friends—indeed the community at large—were totally ruined: then became restless, fretful, quite unhappy, and desponding, besides having occasional fits of irritation, under which she was apt to strike other persons, but never injured herself nor threatened suicide. Her appetite had greatly failed, and she was with difficulty prevailed on to take food. She seemed paralysed as to intellect, and had a perpetual mobility of nervous system. Aperients, ample nourishment, free air, and the kindliest

treatment, brought her into a more quiet and comfortable state. She has had a few excitations, which were easily subdued, and on the whole progresses towards bodily health, but, though cheerful at times and pleased with a little society, has a tendency to settled gloominess of mind.

No. 20. Aged 46, a wife and mother. 'Very mild and gentle before: was in low spirits some years ago: does not manifest any inclination to self-destruction, to injure persons or property. Never was in any public Asylum or private Madhouse. Has been insane for about fourteen months." These are the only particulars communicated in writing at the time of admission. The poor woman was in a wretched state throughout—emaciated to a degree, pale and cadaverous, ceaselessly noisy and restless, blaming herself for what she either had or had not done—called on her children, husband, and friends—refused nourishment of every kind for days—would not swallow even water, though entreating to have it—appeared resolutely bent on death by starvation, and was likely soon to realize it. Much art had to be used in keeping her alive. It succeeded. She now eats heartily, walks about, and has regained bodily strength; but is a noisy, peevish, troublesome, and as yet unpromising, Patient. Her conversation is too limited for the disclosure of any peculiarities beyond fretfulness and self-reproach, for neither of which does there exist any assignable reason.

No. 21. Aged 30. "Irritable: duration fourteen days: depression of spirits for a short time: disease stationary: first attack: seems resolved on self-destruction: no hereditary predisposition: kind treatment adopted: never been in any public or private Asylum."—Such were the answers to the usual questions. The Patient was totally deaf, but had not lost all powers of speech: he made constant use of a slate and pencil to communicate his thoughts, wrote well and rapidly, but blundered systematically in spelling: he had severe ulcers on his legs, and could not walk without crutches. Though impatient to be set at liberty—chiefly because losing time and opportunity to make money, of which he seemed fond—he readily engaged in work as a tailor, showed cleverness in it, and was in every respect easily managed. Perceiving in him neither irritation nor irrationality to any degree whatever, I advised his removal to the house of a relation whom he loved, and

who, besides willingness to take charge of him, expected to obtain employment in his own trade. It was reported of this young man, and not denied by him, that, being thwarted in a wish to set out for the United States of America, where he calculated on prosperity notwithstanding his defects, he made an attempt to get rid of life. But, I suspected from his own remarks, he rather thought to influence others by fear than was serious in his apparent design on himself. He smiled when alluding to it, and just before dismissal vowed against any repetition of the offence.

No. 22. In regard to this Patient I had the good fortune —rarely enjoyed, I am sorry to say, notwithstanding constant entreaties—to receive an ample and lucid statement from his intelligent medical attendant. With a view to example, as well as on the ground of intrinsic merit, I give it entire, with exception of names and disclosing particulars. The writer has my best thanks, but must be aware that his letter was dated more than a year before the accomplishment of its immediate purpose—namely, transmission of the Patient.

"He is about 35 or 36 years of age (early in 1839)—employed himself of late as a —— in a small way, and had realized a little capital. He never was a person of very strong mind, which he may in some degree inherit from his mother, who is very nervous, and at one time, about thirty years ago, got into a state of mental derangement, after giving birth to still-born twins. He had made love to a young woman in the neighbourhood, who, it appears, had never been serious with him, but carried on the joke, while she was in courtship with another, to whom she is since married. About Whitsunday last, when in Church, he fancied some denunciation from the pulpit was directed to him, in regard to the female above-mentioned; since which time he has been quite beside himself. He has never attempted to injure himself, so far as we know, or sought to hurt any one about him; but talks of having *offered himself* to the North Water—to this pool, and t'other mill-dam—but neither would *receive him;* also, that he has been poisoned, or that attempts are making to poison him; and that he has been deprived of his means. I saw him first on the 22nd June last (1838), and have treated him in a general way—first by venesection, blistering on the nape of the neck, cathartics, antimonials, &c.

He has since then been variable, sometimes a little better, but never shown any decided improvement. He is not well situated where he is, and for some time I have pressed upon his friends the propriety of sending him to you, which will give him the best chance of recovery," &c.

His admission was delayed till the beginning of April in the present year, under the hopes, seemingly, that a favorable change either had begun or would daily commence —the usual error by which all parties suffer.

This Patient, though quiet, docile, and in good bodily health, while he can discourse rationally, and seems void of illusions, cannot as yet be deemed fit for ordinary intercourse with his relations and acquaintances. He has unquestionably true grounds of displeasure against some of them— how many or whom cannot well be ascertained; without breathing revenge, he gets excited when certain transactions, implicating several persons, are mentioned; and, in addition to exceeding volubility, with no small indistinctness or confusion of utterance, he has both a wandering of eye, and, at times, a vacant expression, which I can scarcely reconcile with the supposition of perfect mental soundness. Most probably, an experiment now in process will determine the propriety of setting him at liberty. He has got reconciled, I believe, to the loss of a sweetheart, who, by his admission, was quite entitled to prefer a rival: but, besides the painful recollection of another loss to be overcome, he has to take a very sober view of its existing and future consequences. Fortunately he has no bad habits to break, and, as he reads his Bible, the pathway of peace amid all calamities is set invitingly before him.

No. 23. Male, aged 64. Here also, though not to the same extent, I am indebted to a communicant, who wrote as follows:—"Kind disposition, but easily irritated: the cause appears to have been fright, from having lost his way, two years ago, during a very stormy night: nothing particular observed previous to incursion: the symptoms are delusions regarding a future state;—tormented by evil spirits and visions during night: the disease increasing: first attack: ushered in by a depression of spirit and inability to attend his work: for some months very violent, and continues so: attempted suicide, by cutting his throat, on 3d April current (a fortnight before admission): his wife thinks a brother is subject to depression of spirits:

not aware of any other of his relations being so: no treatment: been in no Asylum."

At entry, he looked ghastly in the face, and was dressed as if prepared for or risen from the tomb—there being bandages about his head, and a sort of straitjacket on his arms. Happening to be present when he was raised from the cart which conveyed him, I saw his bonds instantly removed on touching the ground; and, as he appeared both frightened and faint, while he could neither walk nor stand without support, I spoke to him in the blandest manner, and otherwise aided in making the change of residence acceptable. The beneficial effect was immediately visible, and most certainly has continued. He became placid, submitted like a child to every direction, took medicines as well as nourishment, not only without reluctance but gratefully; in the course of a few days could move about unassisted, improved in appearance and health—notwithstanding considerable discharge from the self-inflicted wound, which remained long open—gradually took interest in those around him, displayed good feelings with entire soundness of judgment, and is altogether now so far advanced towards restoration that I cannot doubt of his being speedily in the rank of our Cured Patients. In his case, as in many other cases, the employment of warm bathing proved highly salutary. At the Montrose Asylum, indeed, it is considered almost an infallible remedy for various ailments, and, of course, is often put in requisition, with or without drugs far less easily administered and submitted to. One consequence, *not medical*, may be stated. According to my calculation, of the charge for the latter expended during last year on the threefold Establishment, the proportion applicable to the Asylum amounts to less than *a tenth;* and yet, in fact, *which is medical*, the general health of the Patients may be advantageously compared with that of any equal number of persons at corresponding ages.

No. 24. Aged 50, a Female, unmarried: of stout and rather large make, strong in proportion, very active, industrious, orderly, and careful—also shrewd and intelligent for her sphere of life; but, though kindly dispositioned, somewhat unrefined in address and manner: several weeks before entry, got very restless and not a little irritable, could not sleep, lost appetite, seemed unhappy, but had no serious complaint as to mind or body, though she owned having

some confusion or disorder of thought, and admitted being grieved that a young woman, whom she had reared most tenderly, was about to leave her roof on entering into business. Medical aid having failed to compose her, and as her usual attendants had not sufficient control, while they had reason to dread she might injure herself, removal to the Asylum was resolved on. She went to it peaceably, after a little persuasion, in the hope that warm bathing and temporary retirement would prove beneficial. Though rather discontented there at first, she soon became tranquil, improved as to sleep and appetite, got rid of some irritability, and manifestly exercised self-control so as to need no restraint. She was consequently tried at her own home again, but, almost immediately, relapsed into the former state, with an accession of turbulence; and, at the end of two days, had to be brought back, with a view to safety and confirmed peacefulness. There is ground to suspect a hereditary predisposition in her case: she herself has been more than once in a state of excitement verging on or accompanying, if not constituting, insanity; and, besides recent explosions, a peculiar wildness or energy of eyes, occasionally observable, betokens something more unruly than will justify another speedy grant of freedom.

No. 25. Male, aged 63—of whom only a few particulars were reported—thus: "Quiet and reserved"—meaning as to previous character: "cause unknown: disease has endured upwards of five months: symptoms, restlessness and obstinacy:" the monosyllable "none" given in regard to questions about precursory changes, tendency to suicide or injury of others, and hereditary liability: "the disease appears to be on the increase, and attended with an obvious decline of bodily health—it also appears stationary: ushered in by a severe constipation of bowels: he has been under the guidance of a surgeon, whose attention has been chiefly directed to the state of his bowels: has been insane about five months, and has never been in any Madhouse."

I learned that, in addition to some irregularities proving unfriendly to his constitution, and the potent drugs which were employed for the purpose above stated, he had been copiously blooded during his illness. The Patient's aspect and real condition induced me to think as much, and, at the same time, precluded much hope of a rally. He was utterly prostrate in mind and body, could with difficulty

be made to swallow a morsel, scarcely moved a limb or uttered a syllable, once or twice had a flickering of intellect and a faint desire for sustenance, that might have been imagined to augur farther amendment, but suddenly drooped and died about a week after admission.

In my former Report, I drew attention to similar examples of the hazard impending on those who have been, I must say, over actively treated in the early stages of supposed mania. Some of the worst cases that come into an Asylum, indeed, are such as, had they been transmitted before undergoing a single depletory act, would probably have been the earliest to leave it in soundness of mind, not either the first who sink within its walls, or the oldest and most hopeless of its inmates. I can safely declare, moreover, that, of fifty who have been admitted since the commencement of my duties at Montrose, not one was afterwards subjected to, or had a symptom demanding, the lancet; while, as my professional friends well know, few Physicians surpass me in addiction to that instrument on the occurrence of various ordinary diseases. The maniac, whose fury would subside into calmness and refreshing sleep, on the liberal application of cold water to his head—a practice without danger, if judiciously managed, and the subsequent dread of which is more restraining than fetters—may too often be observed to have an exacerbation immediately after venesection, followed ere long by a collapse that sets all restorative measures at defiance.

No. 26. Aged 57—a tall, rather well-built man, with fresh complexion, and striking though somewhat hard features—a weaver to business—formerly a little irregular in habits—of a roving disposition, and having a great taste for novelty, which he often indulged by peripatetic excursions, to the alarm of friends and the neglect of his own interests—also not a little sceptical in regard to sacred subjects, and, without being quarrelsome, malicious in spirit, or mischievous in conduct, inclined to make sarcastic remarks on most topics, usually accompanied by an acerbity of manner calculated to prejudice him in common estimation. Having been at one time a Patient in the House when under charge of Dr. Browne, who left notes of his case, I am enabled to give farther particulars regarding him on very competent authority—namely:—"Cause not stated, but believed to be intoxication: of some weeks' continu-

ance: was extremely violent and unmanageable, but is now quiet, and, although sententious and abrupt in his manner, he betrayed no indications of irritability or ill temper: the chief feature of his character, and consequently of his disease, is cunning and concealment; so that he finds a pleasure in shrouding his thoughts in mystery, and completely succeeds in his attempts to do so: he walks much alone, and is evidently communing with himself, and rarely extends his confidence to any one else: he once let slip a complaint that the Bible had been altered, and that it was written in characters of blood: upon being subsequently questioned upon this point, he answered that all was right now: to show how much of an adept he is at deception and stratagem, it deserves to be noted that he has escaped from Dundee, Aberdeen, and Montrose Asylums in succession: even upon this occasion, he had contrived to form a ladder of ropes by stealing oakum, and twisting it in his cell during moonlight—to the end of this he attached a part of his beam, threw the whole over the wall of the airing-ground, and made good his object; he returned, however, the following morning—being either driven back by the extreme cold which then prevailed, or in consequence of the complete gratification of his ruling propensity by the success of his scheme: a relapse: is busily employed."

The document thus quoted is of date December 6, 1837. An earlier says briefly:—"Admitted 15th January 1828, labouring under mania, at times troublesome, but in general quiet, very conceited and obstinate: 1st June 1828, Much in the same state as when admitted: 1st June 1829, Continues much in the same state: 1st June 1830, Made his escape 5th April last, and went to his friends, who have expressed a wish to keep him for some time at home on trial."

Learning, when I entered on service, that, after one of his escapades from Montrose, he voluntarily came back at the distance of several weeks, during which he had traversed the Highlands and other parts of Scotland, frequently wet, cold, hungry, and sleeping at times *sub Jove*, or in the veriest sheds—that, on return, he expressed the utmost gratitude to the Matron, whose kindness he had often experienced, with intense joy at being again among "kent folk," and having "braw guid meat afore him, with a cheerfu' ingle" to smile at in turn—while it was manifest that he possessed acuteness of intellect and sundry good qualities which might be wrought on—I resolved, if pos-

sible, to make him feel of some consequence, and for this purpose encouraged his obvious desire to get money. The approach of a suitable season and the vicinity of a farm, totally unconnected with the Asylum, favored my project, one result of which was mentioned in last Report, namely: —"It may be deemed an evidence of the salutary influence thus pointed at (alluding to employment), and therefore worthy of record, that two of my poor Patients were engaged in field-work last autumn, at a distance from what they really considered *their home*, and unattended by keeper or guide; that they profited, in a pecuniary sense, as well as otherwise, by their industry; and that, while one is passing probation as a weaver in the House, the other was dismissed from it months ago, with two guineas in his purse—the fruit of rational habits, and a token of our justice." *That* other is the strange creature now again an inmate. Left to his own will, uncontrolled by the Parochial authorities on whom he depends, he would have been such earlier than his actual re-admission; for, more than once, after subsultory toils at the loom, for which advancing age partly unfits him—interspersed with gyrations through the country *more solito*—he paid a visit to the Asylum as his best haunt; but, contrary to his wishes, had to be warned from it in the absence of any order for detention. I need scarcely say that this, when at last effected, was not reckoned by him a punishment, and that he cordially shook hands with me on being again hailed as a free citizen. He has leisurely taken to weaving, and behaves quite like a rational being; but, I suspect, is already brooding the idea of a wider though less eligible privilege.

These details, being faithful records from observation, must be allowed to possess some value, independently of reference to the Establishment in which the materials for them were presented. But the Managers, Guardians of that Establishment, will naturally look on them in connexion with it, and as evidence of its maintaining a station, however humble comparatively, among the Institutions for the recovery, no less than the security, of persons labouring under mental derangement. The restoration even of a few of these to the ordinary enjoyments and concerns of life, after a seclusion equally brief and opportune—indeed in

sundry respects as agreeable as it is salutary—cannot be viewed with indifference by any who have hearts to sympathise in the afflictions of other men, or a just sense of the common liability to misfortunes and disease. In confirmation of a principle often stated, and which never ceases to be important, it is worthy of remark that by much the greatest proportion of the recovered Cases—in fact, six-sevenths of the whole—consisted of those Patients who were brought to the Asylum very early after obvious invasion.

Among the *Dead* is comprehended one highly talented and engaging youth, to whom special allusion was made in last year's Report (p. 13.) He remained totally helpless, in every respect, for many weeks after the date of that document; but, towards the close of life, as was anxiously wished, had a gleam both of intellect and moral feeling, which afforded the best of all delights to a beloved relation.

With one exception—and this, as already shown, was most distressing—in all the other examples of mortality, the mental faculties, long dormant or greatly impaired, continued so unchanged to the minute of separation from their organized tenement. This list was likely to have been increased by two or three of our most aged Patients, who seemed at different periods rapidly approaching the end of their days, but who have since rallied so much as to get about and enjoy their usual comforts. One of them—a resident during forty years—would be greatly missed, as he is of a mild, obliging disposition, and always ready for gardening or other moderate services. With these exceptions—not to be wondered at—and a few slight ailments, the health of our inmates continued throughout the year to be most satisfactory. Good diet, regularly administered—warm, well-aired sitting-rooms—sufficient clothing—attention to cleanliness—opportunities for gentle exercise—and, above all things, the utmost possible exemption from injuries of temper—make bodily disease a rare occurrence in the House. Even Catarrh and Rheumatism, so prevalent in town at certain seasons, scarcely paid us a random visit; and, sure I am, the Apothecary was not a gainer to the amount of five shillings by all the maladies that appeared in it throughout winter and spring.

Weaving and picking oakum at one wing, knitting and sewing at the other, continued to be our chief laborious occupations, as in former times; but we have also had shoemaking on a small scale, with a few efforts towards other

of the minor handicrafts. A turning-lathe, often spoken of, and lately authorized by the House Committee, will doubtless be a material acquisition. Several of the Males lent willing assistance in erecting the stage or scaffold to which I alluded when speaking of Case No. 1. It is in the rustic style, has an agreeable appearance, can be easily ascended, and, when so, affords a view, above and beyond the surrounding dead walls, that attracts some of the laziest and most enfeebled of our lodgers. It cost little more than £10—a sum quite paltry in comparison with the benefits accruing; and, accordingly, another, intended for the airing-ground of the Females, has been ordered by the above-mentioned Gentlemen. Only such as, like them, have had opportunity to witness the management of the insane, can thoroughly estimate the advantages derived from contrivances of the kind. In point of fact, as is now well known, they are much more efficacious than all the coercive measures ever devised—which, to say nothing else, at once converted Overseers into Gaolers or Executioners, and tended to destroy the very elements that warranted any hopes of their wretched victims. Were it practicable, it would be instructive, to contrast the blacksmiths' accounts of the olden times with those of modern days, in so far as relate to Madhouses. One *item* of the former, heavy in a double sense, has no place in the latter. Nay, so extraordinary has been the revolution in treatment within the memory of living witnesses, even the lighter apparatus of a strait-jacket ceases to be charged against the Managers. An applicant for one, intended to be imposed on a Patient in the country, was lately quite astonished when I stated that, for the strongest of all reasons, we could not possibly supply it. During the absence of a proper keeper, a simple leather muff was granted instead, but was immediately superseded when the individual arrived at head-quarters.

As the subject of *Restraint* has been recently brought forward in a variety of publications—and especially by Mr. Gardiner Hill of Lincoln, who contends for its total abolition in the treatment of the insane—I conceive it my duty to add a general opinion to these remarks, and it may be delivered in few words. My judgment, founded on many years' observation—and I shall make no pretensions to eminent humanity—is decidedly in favor of that gentleman's views, as either leading to or connected with the safest, easiest, most effectual, and, therefore, the best,

system of practice for the cure of the deranged. I concur also with him in maintaining that, to render the plan adequate for all desirable purposes, "several essential requisites must unite." These are well stated by him:—"1. A suitable building must be provided, in an airy and open situation, with ground sufficient for several court-yards, gardens, and pleasure-grounds, commanding (if possible) a pleasing and extensive prospect. 2. There must be a proper Classification of the Patients, more *especially by night.* 3. There must be also a sufficient number of strong, tall, and active attendants, whose remuneration must be such as to secure persons of good character, and steady principle, to undertake their arduous duties. And 4. The House-Surgeon must exercise an unremitting control and inspection, in order that the plan may never, under any circumstances whatever, be deviated from in the slightest degree." *

* Mr. Hill, in a foot note, most truly says:—"Suicide under this system must be obviated by the constant attention of the House-Surgeon to the proper Classification of the Patients *by night.* Those disposed to suicide should always be placed in an Open Dormitory under watch. *Nothing else can prevent suicide under any system whatever.*" For my own part, I do not recollect a single instance of its having taken place *in company;* and I entertain a belief that those who are disposed to perpetrate self-destruction would be among the foremost to arrest the hands of others who attempted it. The following paragraph, taken from the *Morning Chronicle* of 3d June last, though brief, affords a striking illustration of the difficulty experienced, under ordinary arrangements, in preventing such horrid deeds:—

"*Suicide of a Female Lunatic in Bedlam.*—Last evening, at seven o'clock, an inquest was held before Mr. Payne, in the board-room of Bethlem Hospital, St. George's Fields, on the body of Jane White, aged forty-five, a lunatic, who committed suicide by hanging. Harriet Broady, one of the female keepers, said, deceased came first under her notice on Monday evening, when, on account of her uncleanly habits, she was removed from her regular ward to a cell on the basement storey. Witness put her in a strait-waistcoat, and she appeared very restless and melancholy. Witness had no difficulty in putting on the strait-waistcoat, and shortly afterwards she was placed in her bed. Witness saw no more of her until between six and seven o'clock yesterday morning, when, on unlocking her cell door, she discovered her suspended by means of the strings of her strait-waistcoat from a piece of iron that fastened a pipe for carrying off the rain, a part of which pipe ran through the corner of the cell withinside of it. The House Apothecary was instantly called, who cut down deceased, and pronounced her dead. By the Coroner: The waistcoat was put on properly, and secured in the usual manner, yet deceased contrived to get out of it. Deceased was also fastened down to her bed by a species of web-strapping, which she snapped asunder. By a Juror: It is usual to lock up refractory lunatics for ten or twelve hours together, and not to visit them during that period for fear of exciting still more their passions. Ann Thoms, another keeper, said, deceased had been under her care since February last, when she was first admitted from Stratford St. Mary's, Suffolk. She was always in a low desponding mood, and was esteemed the most inoffensive patient in all the hospital. Ann Powell, another nurse, said, the waistcoat was put on at her suggestion, after having reported the case to the matron. She was positive that the waistcoat was properly secured. The Governor said that there had happened in the hospital only eight cases of suicide in the last twenty-five years, which was entirely owing to the extreme vigilance of the keepers, whom the patients were continually watching, to try and find an opportunity of destroying themselves. Verdict—Insanity."

My regret is, that the essentials now enumerated do not everywhere co-exist, and that Montrose cannot be held up as fully exemplifying both their combination and their highly probable results. In the absence of some of them, accordingly, and at variance with my own creed, I must tolerate the occasional imposition of hand-cuffs, to prevent greater evils than they inflict. Mr. H., I am persuaded, would not blame me, under circumstances, for departing from the *true faith*, inasmuch as, *e. g.*, I pinioned one man, because, having an ulcerated leg, which needed poultices and ointments, he repeatedly tore off and actually swallowed them; or that, with a latitudinarianism not deemed heretical in a *pure* Physician, I had another tucked down to bed till the turbulence of Delirium Tremens yielded to a potent opiate; or even that, with only one female attendant for twenty of her sex, I permit the temporary confinement of a couple of arms which would both reduce their possessor to nudity and dispense merciless blows on all around. While I make these admissions in behalf of Mr. Hill's proposition, I confess the apparent force of an objection—for such is virtually the meaning of certain queries—lately put by an intelligent Reporter. "Even allowing," says he, "the practicability of the measure (total abolition of restraint), whether it be humane and desirable, is a question that appears to be very problematical. If the mind of a Patient can be subdued by the power of intimidation, so as to paralyze his efforts in the hour of maniacal paroxysms, would his condition be more happy, or his welfare more promoted, by being under the influence of terror? Is it better to enslave the mind than enchain the body? May there not be greater benevolence and sympathy in subjecting the members of the body to salutary restraint than in the exercise of a moral discipline which will ever appear to human feeling burdensome and oppressive?" *

It will be observed that I used the phrase, "apparent force." In truth, there is nothing else presented by this extract. Mr. Hill might reply to it most cogently without abating one iota of that for which he contends, and simply because he would and must be among the very foremost to repudiate the assumed premises from which an inference

* Nineteenth Annual Report, &c. of the Dundee Royal Asylum, pp. 14, &c. My belief is, that, on coming to full mutual understanding of views, Mr. Hill and the Reporter, as well as myself, would be found essentially in concord.

opposed to his suggestion is deduced. To be brief, he does not argue for *terror*—neither does he mean to supersede bodily restraint by *a worse bondage of mind.* Moreover, it seems his deliberate conviction that the former, as usually practised, almost necessarily leads to, if not mainly operates by, the latter; and that, generally speaking, neither would be needed, if a moral discipline, not otherwise "burdensome and oppressive" than is every check on violent passion, were more systematically exercised and more confidently trusted.

To conclude these observations—and the importance of the theme demands so many at least—while, in cases where intellect is totally suspended, as under the pressure of Epilepsy, or in the rage of Phrenitis, I should not hesitate a moment to guard against biting through the tongue by a wedge between the teeth,—or precipitation over a window by strapping down the limbs, the capability of reasoning, though in a very low degree, would be an argument with me for almost any species of mental influence as preferable to physical coercion. Imperfect as our classification may be reckoned, one immense benefit, I verily think, daily arises from it—if, so to speak, a negative can have a positive product—namely, that being, as it were, surrounded by an insuperable force—depending on the number of his associates, many of whom have the same tendencies to violence—each individual sees and feels, or, which is equal, imagines, that every outrage would be repressed instanter, and, consequently, worse than vain. Now, style this sort of influence "the power of intimidation" or terror—suppose it to merit the name—and that it actually enslaves the mind—can I, ought I, to abandon it, at the sacrifice of peace, one of its obvious results, and have recourse, instead, to any mechanical devices whatever? My own answer is the stoutest—No. At the time when I entered on charge, the most dangerous Patient in the House—a man deemed so ferocious and so filthy as to need perpetual hand-cuffing, with isolation from every living creature—was set at liberty by my direction. One of his first acts—he having been in the army—was to salute me *a la militaire:* he called me, shortly afterwards, an officer of his own regiment, and obeyed my commands accordingly: month by month did one or other human feeling acquire strength over his bad propensities: now he marches about for hours without

molesting any one, causes no trouble to the Keeper, frequently converses very shrewdly, occasionally reads the Bible, and, though long ranked among the Incurables, manifests faculties which may probably be cultivated into redemption from their grade. Another, equally unsafe at times, affects to be the guardian and protector of all who are feeble around him; and being, to a certain extent, entrusted with them, may often be seen officiating as a nurse—gently carrying one Patient on his back to bed, washing and clothing a second, feeding a third, smiling and chattering to all. Yet, strange to say, as some may imagine, this is the very individual who, resenting the abstraction of an article confided to him, did not scruple a moment to punish the offender (No. 5) by an equally hearty blow. I might multiply instances in confirmation of the same principle; and it is incalculably cogent: Where judgment is not altogether destroyed, some portion of sympathy—the nucleus of moral character—may be reckoned on as co-existent with it; the treatment which a child receives from his parent is due to their possessor, and rarely fails, without odious allies, to give them a triumph over the fiercest opponents.*

* The sentiments lately delivered in a popular work will not be allowed to pass unheeded and void of effect. Some of our Managers were kind enough to inform me of them, as tallying with my own.

"It is out of place for us to descant upon the wanton cruelty, the needless privation, the caprice, and absolute brutality of treatment, to which maniacal Patients have been subjected, even in what are considered well-regulated Asylums. With these, the public are already tolerably well acquainted. The evil is confessed; and we, therefore, come at once to the proposed remedy. Every one will agree that the total abolition of restraint is most desirable. Mr. Hill contends that it is practicable. He has seen the experiment fairly made, and proclaims its complete efficacy. This subject is at present doubly interesting, from the remarkable fact that Dr. Conolly, the new Superintendent of the large establishment at Hanwell, in which Sir William Ellis was supposed to have carried the treatment of the insane to perfection, has completely changed the system there, and at once abolished all restraint; and this, as we have been informed, after a careful inspection of the system now in operation at Lincoln. Mr. Hill appears to have conceived the humane, and, as we trust it may prove, enlightened scheme of abolishing coercive remedies, and every kind of personal restraint, soon after he obtained the charge of the Asylum, which is four or five years since. It came into gradual operation as a system; though, with many Patients, he at once adopted the new mode of treatment on their admission into the Hospital. His labours appear to have been properly appreciated by the Directors, and some of the Physicians of the place; and, by both, his humane efforts have been strenuously supported."

Then, having stated the "main agents upon which Mr. H. relies, in banishing strait-waistcoats, fetters," &c., the writer details a case, in the language of that gentlemen, followed by some of his observations. Leaving these, as too long for this place, I make no apology for quoting from the latter portions of the article.

"Prior to Mr. H.'s appointment, there appears to have been a gradual amelioration of the treatment of the Patients in the Lincoln Asylum. We

Consequent on removing the Infirmary from its old site, in the top flat of the Asylum, was the adoption of a judicious plan, by Mr. Middleton, architect, for turning the vacated wards into Bed-rooms with Parlours. These are nearly completed, and, when furnished, will accommodate ten or twelve Boarders of the higher classes in a manner not yet realized at Montrose, besides aiding in the farther division and arrangement of Patients, so long and frequently recommended. Other changes or additions are contemplated; so that the Establishment may be considered as undergoing a transformation no less due to its own repute than called for, in the way of salutary competition, by the extraordinary efforts towards improvement on the part of like institutions elsewhere. The oldest Lunatic Asylum in Scotland never will, never need be, the largest or most splendid. But nothing short of what is inconceiv-

find an excellent letter, from Dr. Charlesworth, of date 1828, inculcating the absolute necessity of publicity, and the continual and strict inspection of every department of the establishment, and of every Patient in it. He would have it as open to strangers as to the Governors and regular visitors; and alleges, truly, that proper officials will rather court than shun inspection—feeling pride in the cleanliness, order, and kind treatment which must be visible to every intelligent observer. In the year 1829, the use of the strait-waistcoat was forbidden, save when expressly directed by a written order from the visiting Physician of the month; and the Director was ordered to keep a journal, in which daily entries should be made of every act of severity and restraint used in the institution; which journal was to be examined weekly by the Board: in short, the establishment was keeping pace in improvement with the best-managed of the period; and it now, chiefly from the zeal and intelligence of the House-Surgeon, seems to have taken the lead."

Lastly, in the way of extract:—"We wish that we were able to report upon Dr. Conolly's grand experiment at Hanwell; but the result must soon be promulgated, at least partially. A revolution so sudden and sweeping, as setting 800 Lunatic Patients free from every species of personal restraint in one day, may, at the outset, be attended with partial failure. Preparatory measures could not have been so well matured at Hanwell as at Lincoln, where the change was more gradually introduced. But not for partial failure, if it should occur—not for partial nor for repeated failure—are we to lose sight of a principle always dear to humanity, and now to a remarkable extent sanctioned by science and actual experiment. The outcry against loosening the bonds of madmen, is much on a par with that which protested against the insanity of entrusting negro slaves with the natural rights of men, or teaching boys to read without birch, and will, we hope, be treated as equally senseless. What has been successfully tried at Lincoln may be repeated in every place where the same enlightened and benevolent zeal presides and acts."—(*Tait's Edinburgh Magazine, May* 1840. *Pp.* 314, *&c.*)

In my opinion, as the reader may have possibly inferred from previous observations, the experiment, prudently set about of course, has a likelihood of success somewhat proportioned to the number of Patients on whom it is tried; and the same remark, with due qualification, applies to most of the principles on and by which the treatment of the insane ought to be conducted. As at one time a candidate for office at Hanwell, I freely acknowledge that the very magnitude of its scale, so far from being an intimidation, was a charm to my mind, then and for long under a conviction that the highest and the largest benevolence would ever prove the easiest and most prosperous element in the charge of an Asylum.

able—the grossest apathy, or a parsimoniousness equally unjust—can hereafter prevent it from fulfilling every desirable object, as one in which humanity and science may either become paramount to Mental Diseases, or yield the best consolations under their inevitable dominion.

Before terminating this Report, I must express my delight that one evil, against which, as some of the Managers know, there was occasion to remonstrate, is about to be remedied. For a special reason, it had of late given me more than wonted anxiety. Thoroughly to have it understood, I may remark, in the first place, that different kinds or states of insanity, as of other disorders, require different sorts of *diet*, no less than of medicaments. Where, for example, there is increased action of the sensorium, with manifest determination of blood to it, food, to prove salutary, or even safe, must be bland and free from stimulating qualities; while, on subsidence of excitement, or when depression and debility have set in, a return or recourse to generous nourishment is both allowable and expedient. Milk, farinaceous substances, vegetables, alone can be administered judiciously in the former case; animal matter in the liquid or solid form, with or without cordial beverages, are admissible in and may be demanded by the latter. Truths so demonstrable by experience, and, indeed, almost self-evident, are far from having had due attention in all Asylums—at least in such as contain the fewest grades or classes of Patients—and these, too, distinguished chiefly by the amount of board—not the features or condition of malady. But what have been, are and must be, the consequences of transgression in this respect—the result of maintaining one common fare, be it either rich or the reverse, among twenty or thirty persons, exceedingly varied in age, constitution, symptoms, and, of course, medical claims; while, from the very circumstance common to all—and, which is by no means unusual, a voracity that brooks scarcely any limitation short of mechanical inaptitude—they are neither privileged to select from their inclinations, nor expected to deliberate for their welfare? Without attempting thoroughly to answer this question—it is an onerous and urgent one—I do not scruple to say, that the preponderance of epileptic and incurable cases, met with in all Institutions of long standing, must be ascribed, in an eminent degree, to perseverance in a nearly uniform system of diet, which, under a mistaken notion of economy, though, no doubt, to

the ease of attendants, contravenes and defeats the best established principles of Medical practice. An essential advantage of certain arrangements, frankly agreed on by the House Committee, will be the power to regulate modes of living, in accordance with the physical predicaments of our inmates. While on this subject, I take sincere pleasure in quoting the kindred sentiments of a cotemporary Superintendent, who has the merit, not so much of suggesting as of enforcing due regard to it. "In most cases," says he, "especially in those of the poorer classes, who are often, when admitted, much debilitated and emaciated, we have found benefit from a diet rather generous and restorative; but we are well aware, that even where there is no evident tendency to inordinate vascular action in the system, a degree of feverishness generally suceeeds a full meal. The pulse becomes accelerated, the face flushed, and the general heat of the body increased. Such effects of food are particularly remarkable in cases of Lunacy, in which these and other well-known symptoms often indicate an increased determination of blood to the head. The frequent repetition of this state tends to produce, or to exasperate, a paroxysm of Lunacy; and ultimately to terminate in apoplexy or other fatal condition of the brain. While, therefore, we have recently adopted some changes in the rotation of our articles of diet, introducing (especially among Patients of superior rank) a more gratifying variety of food, yet this is always done with careful discrimination. In general, where there is great excitability, the food must be in moderate quantity, and of the least stimulating quality. We have had many instances of Patients who became quite unmanageable, if indulged with the smallest daily allowance of animal food, but who remained perfectly quiet and submissive so long as they were confined to vegetable fare.*"

Among the hitherto unascertained though expected benefits of a diminished rate of postage charges, it is most agreeable and promising to all concerned, that an augmented interchange of reports and sentiments between the functionaries of Public Charitable Institutions has been experienced. No department of these is likely to be more advantaged by the facilities so afforded than Lunatic

* Twenty-sixth Annual Report, &c., of the Glasgow Royal Asylum for Lunatics, pp. 7, &c. Some remarks following the above extract relate to another, but not unconnected or insignificant subject.

Asylums. Having already shared in the contributions thus promoted, I must express a desire that the Managers will sanction similar returns on my part. They cannot do so without credit to their own charge, or aiding a cause appreciated by every true philanthropist.

My cordial thanks are due to the House Committee, who have sustained me, and to all who have co-operated, in the duties of the year. Valuing praise by its sincerity, not the words in which it is expressed, they will pardon the omission of names, because conscious, from other evidence, that I comprehend the whole in this form of approval.

In regard to one department, above my own sphere, but assuredly not beyond my wishes, a speciality will be borne and expected. Under the paternal guidance of the Rev. Mr. Wilson—many years Chaplain to the Establishment—our unfortunate, but not neglected, or totally insensible Patients have had the blessings of religious services and instruction on Sabbath mornings throughout the year. For obvious reasons, by no means exclusively applicable to the Insane, the great and ultimate effects of these must, in general, be matters of faith rather than of observation; but, respecting the safety and unexceptionable propriety of continuance in them, I should be surprised, no less than grieved, to hear a doubt from any one who acknowledged the authenticity and power of the Divine Word.

And now, seeing a new era has commenced in the history of a Charity so long equally beneficial and creditable to Montrose, I close with a hope and the prayer that, while in office as Superintendent, my labours for its prosperity may be blessed of Him, who alone, in imparting a sense of things "good and profitable unto men," can give likewise the ability by which they are to be accomplished.

RICHd. POOLE.

Montrose, 5th June, 1840.

REPORT BY THE HOUSE COMMITTEE.

The state of the Institution in all its departments, as well as the new arrangements and improvements introduced during the year, are so fully brought out in the Report of Dr. Poole, the Medical Superintendent, that the Committee feel themselves relieved from the necessity of adding any thing regarding them. They have only to express their satisfaction with the internal management generally, and, in particular, their warm approbation of the services of Dr. Poole, whose attention and zeal in the discharge of his duty have been most exemplary and unremitting. Nor has his success in the treatment of his Patients been less satisfactory. Although it is well known that the great majority of cases in the House are confirmed and of long standing, it will be found that the number of cures effected bears a high proportion to the total number of Patients, and that under a system peculiarly mild and humane, and distinguished by the almost entire absence of personal restraint.

The Committee trust that, as the newly fitted-up apartments are now nearly ready for occupation, no time will be lost in making them available for still further classifying the Patients; and that the House Committee, now to be appointed, will be empowered to carry out such improvements as may be suggested for promoting the comfort and cure of the Inmates, and maintaining the character of the Institution.

Asylum, 8th June, 1840.

REPORT OF THE INFIRMARY COMMITTEE,

Appointed at the Annual General Meeting in June, 1839.

The Building of the New Infirmary was completed by the Contractors in the month of August last year. Afterwards, the wood work in the House (with exception of the floors) was painted before the admission of the Patients, who were first received into the House on 29th November, 1839.

The Dispensary was removed from the Asylum to the rooms intended for it in the New Infirmary on the 19th December last.

The Committee have found it necessary to have four Servants in the House—viz., a Housekeeper, House Servant, and two Sick Nurses—one Nurse for the Common Wards, the other for the Fever Wards.

On the opening of the New Infirmary, Dr. Poole took charge of the Patients in the House, on the understanding that one of the Medical Gentlemen, having charge of the Dispensary Districts, should by turns (in case of need) act along with him. Dr. Poole has, up to the present time, been able to take the charge of all the Patients in the House, with only occasional help from the Dispensary Surgeons. This arrangement has gone on much to the satisfaction of the Infirmary Committee; and the Committee recommend that the same arrangements be continued for the next year.

Dr. Poole has had the sole charge of the Dispensary, which has been open every day, except Sundays, from two to three o'clock, afternoon.

In the Dispensary, and also during his visits to the Sick Ward, Dr. Poole has had the services of John Balfour from the Asylum.

The most careful economy has been practised by Dr. Poole in the expenditure of the Dispensary; and on this

account, as well as in consideration of his uniform kindness and attention to the Patients under his care, your Committee consider him well entitled to the thanks of the Managers.

In the general expenditure of the House also, the most careful economy has been practised.

The amount of Subscriptions received for the Building, including the value of furniture from the Asylum, has been	£3,135	10	7			
To this add interest received from the National Bank	22	15	7			
Making together				£3,158	6	2
The total amount paid for the Building of the Infirmary, including extra foundations, heating apparatus, gas pipes and fittings, as also, wall, gates, and railing to Bridge Street, and back wall to the Basin, is	£2,888	5	4			
And for household furniture, including what was transfered from the Asylum	259	10	3			
Together				£3,147	15	7
Leaving a balance of only				£10	10	7

But there have yet to be paid the following accounts:—

To the Contractor for Building the south boundary wall	£37	16	0
Do. heightening west wall	10	0	0
D. Mitchell for building pig stye and ash-pit, and laying curb stone to the street, paving crossing at gate, and sundry jobs	23	0	7
Mr. Collie, architect, his account	6	15	0
Charles Gordon for levelling garden ground, say	7	0	0
John & Francis Japp for furniture	23	4	6
	£107	16	1

Thus leaving to be provided for about one hundred pounds to pay the balance for building, enclosing, and furnishing.

The amount of Annual Subscriptions, Donations, and Collections received, is.....	£186	8	0
And for Boarders in Infirmary.....	6	14	1
	£193	2	1
The expenditure of the House and Dispensary since 26th November 1839, has been....£153 1 6			
Add incidental charges, chiefly for printing and advertising... 9 5 11			
Making together.....	162	7	5
Which, deducted from the receipts, leaves a balance of.....	£30	14	8

At the Monthly Meeting of Managers on 7th January 1840, it was remitted to the Committee to take the necessary steps to give publicity to the views of the Managers in extending the benefit of the Infirmary, and for procuring aid in the shape of Collections, Contributions, or Donations for its support.

In furtherance of these instructions, the Committee caused the following statement, prepared by the Rev. Dr. Smith, one of the Members of Committee, to be repeatedly advertised in both the Montrose Newspapers, and also to be generally circulated by forwarding copies in letters from the Secretary :—

"In fulfilment of the task imposed upon them, the Committee respectfully invite the attention of the public to the following statement :

"Montrose and its neighbourhood have for many years enjoyed the advantages of an Infirmary ; and by such as have shared in them, and by the community at large, these advantages have been duly appreciated ; still, however, as it occupied a part of the same building in which the Lunatic Patients were kept, and as persons labouring under any infectious disease were thus inadmissible, its usefulness as an Infirmary was necessarily very much limited. There was thus no provision for the timely separation of the infected from the healthy, which is so directly calculated to arrest the progress of infection. With a view of remedying this material defect in the Institution, the Managers resolved to make an effort to erect a separate building as an Infirmary ; and this desirable object, aided by liberal contributions from the town and neighbourhood, they have now been able to accomplish. The new building was opened some weeks ago. It is capable

of accommodating about sixty Patients, and is open to all suffering under any disease whatever, where there is any prospect of effecting a cure.

"But in order that the Institution may be fully efficient, the Managers will still have to look to that public liberality which was shown so largely in the contributions to its erection. In many congregations yearly collections for the Infirmary are made; and while these have been hitherto to such an amount as to show the general impression of its utility, it is hoped that these collections will be not only continued, but increased, in consequence of its intended means of usefulness; and also that parishes and congregations, which have not been in the habit of collecting, will be induced to do so. As an encouragement to make such collections, the Managers have resolved 'That the benefits of the Institution shall be extended gratis to the poor of all congregations in which annual collections are made;' thus, for a single collection a year, such congregations are insured against all the expense to which they may be liable for medicines and medical attendance. Another of the means to which the Managers look for such support as the Infirmary will require, is annual subscriptions. As an inducement to subscribers to come forward, they have resolved that 'every subscriber to the amount of one guinea yearly shall be entitled to send one Patient a year to the Infirmary; a subscription of two guineas, two Patients; and so on in proportion: thus, for a small annual sum, a subscriber may ensure proper accommodation and medical attendance for any of his servants, or any of his neighbours, in whom he takes an interest, should they be visited with disease. Upon the same principle, tradesmen and those employed at public works may, by uniting together, advance such sums as might secure the best advice and attendance when they are suffering from bodily ailment, or from the accidents to which they are exposed. This is a practice extensively gone into by that class of the community in other towns, and it is not doubted but that in this place also such will be ready to exercise that prudence which their own experience may teach them to be necessary; and thus, as it were, by a mutual insurance, guard in some measure against the effects of those vicissitudes to which they are ever liable.

"Nor are the Managers desirous to direct to the benefits of the Infirmary the attention of those only who may thus receive a full return for their collections and subscriptions. This statement may reach many who may have no prospect of requiring to avail themselves of these benefits in any of the ways to which reference has been made. But it is trusted that an appeal to the Christian philanthropy of such will not be made in vain. A great proportion of the labouring classes find all the exertions they are able to make, and the poor all the aid that may be allowed them, necessary for the supply of their bodily wants when in health. For the pressure of disease they can make no provision, and must, when overtaken by it, be indebted to their wealthier neighbours. And there is no way in which the kindness the wealthy may be disposed to shew can be more efficient than in the support of such an institution as the Infirmary. Even were all the interest of the funds belonging to the joint Institutions of Asylum, Infirmary, and Dispensary expended upon the Infirmary alone, it would be far from being adequate to

its support. Disease would still exist—infection would still spread—while an institution calculated under Providence to arrest their progress remained powerless from want of sufficient funds. It is hoped that this, in the midst of our Christian community, will never be the case; but that many who have prospered in the world, assured from the highest authority, that 'it is more blessed to give than to receive,' will come forward and enable the Managers to follow out their intention in the erection of the Infirmary, and thus render it an extensive blessing to the town and neighbourhood.

"Contributions or Subscriptions will be gratefully acknowledged by Mr. David Hill, banker, Treasurer, or James Leighton, Town-Clerk, Secretary, to the Institution.

"Montrose, 23d January, 1840."

The amount of Subscriptions that has been received from Individuals and Public Bodies has fully exceeded the expectations of your Committee.

In consequence of business connected with the opening of the Infirmary, much additional trouble has this year been caused both to Mr. Hill, the Treasurer, and Mr. Leighton, the Secretary, for which the Committee submit that the thanks of the Managers are due to them.

Montrose, 8th June, 1840.

HOUSE COMMITTEE OF ASYLUM.

Messrs. ROBT. MILLAR (Chairman.)	Dr. SHAND.
ARCHIBALD FOOTE.	Mr. GEORGE PATON.
J. H. VALENTINE.	

INFIRMARY COMMITTEE.

Messrs. GEO. GORDON (Chairman.)	Messrs. ROBERT MILLAR.
JOHN ABERDEIN.	Dr. SHAND.
CHARLES BARCLAY.	Rev. Dr. SMITH.
WILLIAM SIM.	Dr. PATERSON.

APPENDIX.

APPENDIX.

LIST OF BENEFACTIONS

FOR

BUILDING THE LUNATIC HOSPITAL AT MONTROSE,

From the 26th May 1782, to 1st January 1787.

Mrs. Aitken, relict of the Rev. Mr. Aitken	£1	1	0
John Addison, merchant, Montrose	2	2	0
James Adam, gardener, do.	1	1	0
Mrs. Beattie, relict of the Rev. Mr. Beattie	6	0	0
David Brown sen., merchant, Montrose	5	5	0
John Brand, Esq. Montrose, agent for the Bank of Scotland ...	5	0	0
Provost James Bisset, merchant, Montrose	3	3	0
David Brown Jun. merchant, do.	3	3	0
James Boyack, merchant, London	3	3	0
William Baillie, writer, Montrose	2	2	0
Captain Bogie, do.	2	0	0
David Buchanan, merchant, Montrose	1	1	0
Captain James Bremner	1	1	0
William Balfour, merchant, Montrose	1	1	0
Alexander Burn, merchant, do.	1	1	0
Lady Carnegie, Dowager of Southesk	8	8	0
Miss Helen Carnegie of Craigo	20	0	0
Miss Carnegie of Charlton	10	0	0
Miss Clementina Carnegie of Craigo	9	0	0
Miss Eliza Carnegie of do.	6	0	0
Miss Ann Carnegie of do.	5	0	0
Mrs. Cowie, merchant, Montrose	3	3	0
Mrs. Christie, relict of Provost Thomas Christie, Montrose ...	2	2	0
Miss Peggy Christie, Montrose	1	1	0
Sir David Carnegie of Southesk, bart.	21	0	0
George Carnegie, Esq. of Pittarrow	21	0	0
Thomas Carnegie, Esq. of Craigo	10	0	0
Provost Alexander Christie, Montrose	10	0	0
Alexander Coutts, merchant, London	5	5	0
William Christie Jun. merchant, Montrose	5	5	0
Provost William Christie, merchant, do.	2	2	0
Thomas Christie, Balmanno	2	2	0
James Campbell, merchant, Montrose	2	2	0
Alexander Craw, merchant, do.	1	1	0
Robert Crabb, do. do.	1	1	0
Rev. Alexander Carnegie, Inverkeillor	1	0	0
The Parish of St. Cyrus	25	14	0
The Parish of Craig	25	5	9

Mrs. Doig, relict of Provost David Doig	£3	3	0
Mrs. George Davidson, Montrose	3	3	0
Miss Donaldson, do.	2	2	0
Adam Drummond, Esq. of Megginch	21	0	0
James Dickson, merchant, Montrose	5	0	0
William Driver, vintner, do.	3	3	0
John Duncan, merchant, do.	1	1	0
James Dickson, coppersmith, do.	0	10	6
John Erskine, Esq. of Dun	5	5	0
Mrs. Fullerton of Gallary	3	3	0
Miss Ketty Fullerton of Kinnaber	1	1	0
The Executors of Miss Phœbe Forbes	5	0	0
James Farquharson, Esq. Gouch Square, London	10	10	0
Charles Fullerton, Esq. of Kinnaber	5	0	0
William Ford, Esq. merchant, Montrose	5	0	0
David Fotheringham, Esq. London	2	2	0
Bailie Robert Ferrier, merchant, Montrose	2	2	0
Rev. Mr. Fergusson, Farnwell	2	2	0
Bailie David Ford, merchant, Montrose	1	1	0
Mrs. Gray of Carse	3	3	0
Mrs. Green, relict of Mr. Ralph Green, Montrose	1	1	0
Mrs. Gray, brewer, do.	0	10	6
Right Hon. Lord Adam Gordon	10	0	0
David Gardner, Esq. of Kirktonhill	5	5	0
Adam Glegg, Esq., Provost of Montrose	4	0	0
Alexander Gardyne, Esq., Laurencekirk	3	3	0
Captain Guise	0	10	6
David Henderson, merchant, Montrose	2	2	0
Robert Hunter, Collector of Customs, Montrose	2	2	0
Mrs. Johnston, merchant, do.	1	1	0
Mrs. Keith, relict of Capt. David Keith, do.	1	1	0
Right Hon. Earl of Kintore	21	0	0
John Keith, Esq., Collector of Customs, Montrose	2	2	0
Dr. Charles Keith, Morpeth	1	1	0
The Parish of Kinnell	6	0	0
Provost James Low, merchant, Montrose	3	3	0
Bailie John Livie, do. do.	3	3	0
Bailie James Lyall, do. do.	3	3	0
Bailie John Low. do. do.	2	2	0
Andrew Lyall, tanner, do.	2	0	0
John Laing, merchant, do.	1	1	0
Robert Leighton, shipmaster, do.	1	1	0
David Lyall, merchant, do.	1	0	0
Misses Helen, Elizabeth, and Mary Mills	20	0	0
Mrs. Mill of Old Montrose	5	5	0
Mrs. Morrison, relict of Bailie Lachlan Morrison, Montrose ...	5	0	0
Mrs. Millar, Montrose	1	1	0
James Mill, Esq. of Old Montrose	10	10	0
Captain Hercules Mill, ...	5	5	0
James Mitchell, merchant, Montrose	5	0	0
Rev. Alexander Mollison, do.	2	2	0
Bailie Andrew Milne, merchant, do.	2	2	0
Bailie John Milne, do. do.	2	2	0
James Morrison, do. do.	2	2	0
Alexander Morrison, do. do.	2	2	0
John Mather, do. do.	2	2	0
Henry Mill, bleacher, Bervie	2	2	0
William Morrison, hatter, Montrose	1	1	0
James Mill, merchant, do.	1	1	0
David Mill, wigmaker, do.	1	1	0
Rev. Charles Nisbet, do	3	3	0
Andrew Nicol, merchant, London	5	5	0
Mrs. Ouchterlony of Guynd, and Mr. Mill of Bonnyton ...	6	6	0
Miss Peggy Ouchterlony	3	0	0

Miss Mary Ouchterlony	£2	2	0
Mrs. William Ouchterlony, relict of Captain Ouchterlony ...	1	0	0
Mrs. Ann Ouchterlony	0	10	6
Robert Ouchterlony sen., merchant, Montrose	2	2	0
Mrs. Petrie, relict of Capt. Wm. Petrie, do.	2	2	0
Mrs. Pyott, relict of Bailie Pyott, do.	2	2	0
Bailie Alexander Paterson, merchant, do.	5	0	0
George Paton, do. do.	2	2	0
James Paton, do. do.	2	2	0
Miss Betty and Miss Nelly Ramsay, do.	6	6	0
Miss Eliza Renny, do.	2	2	0
Miss Hope Renny, do.	1	1	0
Miss Eliza Rennold, do.	1	1	0
Mrs. Thomas Renny, do.	1	0	0
Miss Peggy Renny, do.	0	10	6
Mrs. Renny, brewer, do.	0	10	0
Sir Alexander Ramsay of Balmain, Bart.	10	0	0
John Ross, merchant, Montrose	5	5	0
Robert Renny, do.	5	0	0
Henry Renny, do.	5	5	0
James Renny, do.	5	0	0
Provost George Ross, do.	5	0	0
William Ross, merchant, do.	2	2	0
Hugh Ross, do. do.	2	2	0
Captain James Renny, do.	2	2	0
Captain William Ramsay, do.	1	1	0
John Robertson, brewer, do.	0	10	6
Mrs. Scott, Dowager of Benholm	6	0	0
Mr. Scott of Criggie	5	5	0
Mrs. Smith of Forret	5	0	0
Miss Jean Scott of Benholm	5	0	0
Miss Scott of Commiston	5	0	0
Miss Jean Scott of Brotherton	1	1	0
Miss Betty Strachan, Montrose	1	0	0
James Scott, Esq. of Brotherton	10	0	0
James Scott, Esq. of Commiston	10	0	0
David Scott, Esq. of Nether Benholm	5	5	0
Robert Speid, Esq. of Ardovie	5	5	0
Alexander Smith, Esq. of Rosebank	5	5	0
David Shand, merchant, Montrose	1	1	0
Charles Strachan, do. do.	1	1	0
Robert Strachan, butcher, do.	1	1	0
David Scott, brewer, do.	1	0	0
Mrs. Taylor, Kirktonhill	7	7	0
Miss Mally Taylor, do.	4	4	0
Miss Ketty Taylor, do.	4	4	0
John Taylor, Esq. do., and of Jamaica	4	4	0
Robert Taylor, Esq. of Borrowfield	4	4	0
Charles Thomson, writer, Montrose	3	3	0
David Taylor, druggist, London	2	2	0
John Torey, brewer, Montrose	1	1	0
John Valentine, shipmaster, do.	2	0	0
Mrs. Captain Wilkie, do.	3	3	0
Alexander Watson, Esq. of Turin	5	5	0
Provost Thomas Webster, merchant, Montrose	4	0	0
John Walker, tenant, Newbigging	2	2	0
Patrick Wallace, Esq. of Lawton	1	1	0
John Wallace, dancing-master, Montrose	1	1	0
George Watson, merchant, do.	1	1	0
Young & Shand, merchants, do.	1	1	0
	*£679	18	9

* This seems to have been applied in payment of the Buildings, which cost £437 8s. 2d., and the balance remained to meet current expenses.

LIST OF DONATIONS AND LEGACIES

TO THE

ROYAL LUNATIC ASYLUM, INFIRMARY, & DISPENSARY OF MONTROSE,

From its Foundation in 1781, to 1st June 1839.

1781.	Amount of Original Subscriptions, ℔ List			...	...	£679	18	9
1782.	Amount of Donations received at this date			...	...	494	19	7
1783.	Do.	do.	do.	...	...	212	6	1
1784.	Do.	do.	do.	...	...	257	12	1
1785.	Do.	do.	do.	...	...	199	10	2
1786.	Do.	do.	do.	...	...	231	11	4
1787.	Do.	do.	do.	...	...	1049	15	6
1788.	Do.	do.	do.	...	...	957	4	5
1789.	Do.	do.	do.	...	...	601	3	1
1790.	Do.	do.	do.	...	...	281	9	10
1791.	Do.	do.	do.	...	...	101	5	2
1792.	Do.	do.	do.	...	...	351	4	0
1793.	Do.	do.	do.	...	...	156	9	0
1794.	Do.	do.	do.	...	...	215	4	3
1795.	Do.	do.	do.	...	...	68	19	6
1796.	Do.	do.	do.	...	...	90	13	9
1797.	Do.	do.	do.	...	...	160	18	6
1798.	Do.	do.	do.	...	...	86	11	0
1799.	Do.	do.	do.	...	...	78	12	5
1800.	Do.	do.	do.	...	...	66	10	0
1801.	Do.	do.	do.	...	...	36	17	3
1802.	Do.	do.	do.	...	...	44	6	6
1803.	Do.	do.	do.	...	...	1145	10	6
1804.	Do.	do.	do.	...	...	245	1	11
1805.	Do.	do.	do.	...	...	20	18	4
1806.	Do.	do.	do.	...	...	19	3	0
1807.	Do.	do.	do.	...	...	11	6	0
1808.	Do.	do.	do.	...	...	32	2	1
1809.	Do.	do.	do.	...	...	2	2	0
1810.	Do.	do.	do.	...	...	58	3	0
1811.	Do.	do.	do.	...	...	11	6	0
1812.	Do.	do.	do.	...	...	216	11	3
1813.	Do.	do.	do.	...	...	74	19	0
1814.	Do.	do.	do.	...	...	7	2	0
1815.	Do.	do.	do.	...	...	12	2	0
1816.	Do.	do.	do.	...	...	188	3	0
1817.	Do.	do.	do.	...	...	6	1	0
1818.	Do.	do.	do.	...	...	94	13	3
1819.	Do.	do.	do.	...	...	95	3	6
1820.	Do.	do.	do.	...	...	9	4	0
1821.	Do.	do.	do.	...	...	31	19	2
1822.	Do.	do.	do.	...	...	5	5	0
1823.	Do.	do.	do.	...	...	4	4	0
1824.	Do.	do.	do.	...	...	4	4	0
1825.	Do.	do.	do.	...	...	6	13	0
1826.	Do.	do.	do.	...	...	108	13	7
1827.	Do.	do.	do.	...	...	4	4	0
1828.	Do.	do.	do.	...	...	2	16	8
1829.	Do.	do.	do.	...	...	18	4	2
1830.	Do.	do.	do.	...	...	299	14	8
1831.	Do.	do.	do.	...	...	70	8	6
1832.	Do.	do.	do.	...	...	79	1	4
1833.	Do.	do.	do.	...	...	122	14	9
1834.	Do.	do.	do.	...	...	78	14	0
1835.	Do.	do.	do.	...	...	204	3	0
1836.	Do.	do.	do.	...	...	92	4	1
1837.	Do.	do.	do.	...	...	82	8	2
1838.	Do.	do.	do.	...	...	155	15	7
1839.	Do.	do.	do.	...	...	112	5	4
						£10,156	7	0

CONDENSED STATEMENT *

OF THE

DONATIONS, SUBSCRIPTIONS, AND LEGACIES,

TO THE

ROYAL LUNATIC ASYLUM, INFIRMARY, & DISPENSARY, OF MONTROSE,

From the commencement, in 1783, to June 1830.

Mr. Mrs. & Misses Mills	£1147	1	0	British Linen Company	£53	11	0
Mrs. Smith of Forret ...	620	5	0	Aberdeen	29	3	6
John Mill's Trustees ...	248	0	0	Dundee	223	17	5
Hospital Fund	115	0	0	Perth, £74 3s., and an unknown Friend, £125	199	3	0
Provost Christie & Family	116	9	0	Glasgow	32	11	0
Charleton Family ...	199	5	0	Riga	73	17	0
A. Drummond, Esq. M.P.	126	0	0	Exrs. of Mr. Hawkins Brown	193	17	6
Alex. Callender, Esq. M.P.	105	0	0	Low & Smith, Gottenburgh	50	0	0
John Duncan, merchant	150	0	0	Thos. Erskine (Earl Kellie)	21	0	0
David Baillie, Wardhouse	86	10	3	J. Stephen, Esq. Hamburgh	50	0	0
Craigo Family	185	9	6	Miss Bell, Arbroath ...	101	11	1
Da. Lyall, Esq. of Gallery	206	5	0	Friends of Miss Harper	100	0	0
Southesk Family ...	166	8	6	Poors' Box, Hospital ...	72	7	5
Sir Alex. Ramsay's Family	62	0	0	Play-Actors' Benefits ...	40	6	6
C. Lyall, Esq. of Kinnordy	134	8	0	From unknown Friends	85	17	6
Lord Adam Gordon ...	47	16	0	Margaret Paterson's Legacy	50	0	0
Duchess Dowager Athol	10	10	0	Clerk Stewart's Donation	50	0	0
Earl of Kintore	26	5	0	Lord Monboddo & Daughter	65	2	0
Earl of Northesk ...	26	1	0	Archd. Scott, Esq. of Usan	21	0	0
Mr. Garden of Troup ...	110	0	0	D. Scott, Esq. of Dunninald	75	0	0
Mr. Mrs. & Miss Scott of Benholm	68	15	0	Horatio Ross, Esq. of Rossie	35	10	0
Mr. & Mrs. Scott of Brotherton	23	8	0	Mr. and Misses Taylor of Kirktonhill, and John Taylor, Jamaica ...	40	14	0
Mr. & Mrs. Scott of Commiston	15	0	0	D. Gardner, Esq. of Kirktonhill	18	18	0
Mr. & Miss Scott of Criggie	13	8	0	J. Walker, Newbigging	32	2	0
Mrs. Yates' Legacy ...	97	1	2	Bailie Alexander Paterson	30	0	0
London	584	6	0	Captain Falconer ...	12	12	0
Edinburgh	110	18	6	Alex. Watson, Esq. of Turin	25	15	0
Bank of Scotland ...	84	0	0				

* Collector Willis, who was at pains to draw up this statement, accompanied it with the following Letter, addressed to Provost Paton:

"Dear Sir,—As I understand the Town-Council are favorably inclined to support the motion, so far as they are concerned, which I intend to submit to the next General Meeting of Managers of the Lunatic Asylum, to have a separate Infirmary and Dispensary, I beg leave to inclose for their perusal a condensed statement of the contributions to that Establishment, from which they will perceive that the Town-Council, as Trustees under John Mill's settlement, contributed £248; and from the Ancient Hospital Funds, £115; but nothing from the Town's Funds,—which encourages me to hope that they may still come forward, in the event of a separate Infirmary being agreed upon. I enclose also a statement of what appears to me is expended at present upon the Infirmary and Dispensary,—amounting to upwards of £300—at least, nine-tenths of which may be considered as applicable to the Town and Parish of Montrose; besides which, 10 gratis Patients are admitted into the House, the expense of whom may be estimated at £15 each—being £115

And 4 at £10—being £5 loss on each 20

£170

So that the Town and Parish of Montrose may be considered as drawing annually from the Funds of the Institution £450—a sum far beyond what they seem entitled to from the contributions made by them.

Montrose, 15th March, 1832."

William Dorward ...	£100	0	0
Pat. Wallace, Esq. of Lawton	22	1	0
Mr. Wright, of do.	16	10	0
Mr. Skene of Skene ...	30	9	0
George Paterson, Esq. of Castle Huntly ...	57	15	0
George Dempster, Esq. of Dunnichen	9	9	0
Daniel Cameron, Inverness	20	0	0
Capt. N. Carnegie, Bengal	21	0	0
Mr. & Mrs. Speid of Ardovie	7	7	0
Lady Jean Belches ...	10	10	0
Mr. Millar	20	0	0
J. Duncan, Esq. of Rosebank	15	15	0
Alexander Duncan, Esq.	5	5	0
T. Christie, Esq. of Balmanno	12	2	0
Alex. Smith, Esq. Rosebank	15	15	0
J. Strachan, Esq. of Woodside	12	12	0
Mr. Guthrie of Guthrie	10	10	0
Mr. Moir of New Grange	10	10	0
Thomas Brown, Esq.	10	10	0
Major Gardyne of Middleton	10	10	0
Jas. Carnegie, Esq. of Balnamoon	4	4	0
P. Carnegie, Esq. of Lower	5	5	0
Da. Johnston, Esq. late of Gottenburgh	5	5	0
William Gibson, Esq. Fithie	5	5	0
Robert Pease, Esq. Hull	£8	8	0
Alexander Falconer, Esq.	6	6	0
Alex. Strachan, Esq. of Tarry	5	0	0
Mrs. Ouchterlony of Guynd, & Mr. Mill of Bonnyton, & Misses Ouchterlony	21	17	0
J. Gardyne, Esq. Middleton	5	0	0
A. Ferrier, Esq. of Kintrockat	5	0	0
Exrs. of Mrs. E. Anderson	10	0	0
Mr. Mrs. & Miss Fullerton, Gallery	9	4	0
John Maberly, Esq. ...	12	12	0
Alex. Gardyne, Esq. and Lord Gardenston ...	14	14	0
A. Straton, Esq. Broomley	11	11	0
Mr. Mitchell, Col. of Excise	10	10	0
Thos. Todd, Esq. Orphan Hospital	9	4	0
Mr. George and Mr. Ogilvy	10	0	0
Rev. Mr. and Mrs. Bate, Inchyra	5	5	0
Mr. Gray of Carse ...	3	3	0
Jas. Campbell, Glenskenno	5	5	0
Lord Dunsinanne ...	2	2	0
Dean Cartwright	2	2	0
Sir N. Dickinfield ...	2	2	0
Gibson & Co. Newcastle	1	1	0
	£7268	0	10

MONTROSE SUBSCRIPTIONS,

From the commencement, in 1788, to June 1830.

Mrs. Aitken	£1	1	0
John Addison	6	16	6
James Adam	1	1	0
John Allan	1	5	6
Colin Alison	3	0	0
William Aberdein	0	5	0
Captain J. Aikman ...	1	1	0
Mrs. Beattie	6	0	0
Colonel Brodie	2	2	0
D. Brown	5	5	0
John Brand, Esq. ...	8	3	0
Provost Bisset	3	13	0
Andrew Bisset	1	1	0
D. Brown jun.	4	9	0
William Baillie	3	3	0
Captain Bogie	2	0	0
D. Buchanan	1	1	0
Captain J. Bremner ...	1	1	0
William Balfour	3	1	0
A. Burn	2	16	0
John Barclay jun. ...	0	10	0
John Barclay, dyer ...	1	16	0
William Burnett	1	5	0
Andrew Barrie	1	0	0
John Beattie	2	12	6
Thomas Bate	£5	3	0
George Bean	0	10	0
Mr. Boyle	0	10	6
William Burness, painter	4	14	9
Mr. Bowick	1	1	0
Andrew Bell	1	0	0
James Baillie	1	11	6
Mrs. Cowie	4	4	0
James Campbell	4	14	0
A. Craw	1	1	0
R. Crabb	1	1	0
H. Cloudslie	0	5	0
John Cobb	2	11	0
Mrs. Chalmers	0	5	0
James Cowie	2	2	0
George Croom	1	1	0
Mr. Craigie, druggist ...	12	12	0
Captain John Craigie ...	0	10	6
Mrs. Doig	4	4	0
Mrs. G. Davidson ...	3	3	0
Miss Donaldson	13	13	0
Miss Dawson	2	2	0
J. Dickson, merchant ...	10	15	6
J. Dickson, copper-smith	3	2	6
W. Driver	4	4	0

J. Duncan	£2	6	6
Robert Dempster	1	5	0
Mr. Dunbar	0	10	6
Executors of Miss P. Forbes,	5	0	0
William Ford, Esq. ...	6	1	0
Bailie D. Ford	3	18	0
Bailie Ferrier	3	13	6
Mrs. Fotheringham ...	6	5	0
David Fotheringham ...	1	0	0
George Forbes	0	10	6
Thomas Findlay	0	5	0
Robert Ferrier	0	10	6
Alexander Gardner, Esq.	6	3	0
Alexander Gardner ...	4	4	0
Dr. Patrick Greenhill ...	2	0	0
Mrs. Green	1	1	0
Mrs. Gray	0	10	6
Adam Glegg, Esq. ...	14	7	0
Captain Guise	0	10	6
Dr. S. Guise	3	3	0
Robert Glen	2	0	0
Dr. Garden	0	10	0
D. Henderson	4	4	0
R. Hunter, collector ...	2	2	0
Mrs. Dr. Hunter	6	6	0
James Henry	1	10	0
James Hampton	1	5	0
James Hadden	0	10	0
Captain John Hume ...	0	10	6
H. Herriot	1	0	0
Mrs. Johnston	1	1	0
Thomas Jolly	0	15	0
Mr. James	0	10	6
Alexander Innes	0	10	0
John Innes	1	0	6
J. Keith, Esq. collector ...	18	13	0
Mrs. Captain D. Keith ...	2	2	0
Dr. Keith, Morpeth ...	2	2	0
Miss Keith	5	5	0
John Kinnear	6	16	6
David Kinnear	0	10	6
Provost Low	4	14	6
Bailie Livie	3	3	0
Bailie Lyall	5	5	0
Bailie Low	5	15	6
Andrew Lyall	3	13	0
John Lamb	2	2	0
John Laing	1	11	0
Captain R. Leighton ...	9	8	0
D. Lyall	2	10	6
John Low	1	19	6
A. Lamond	0	8	0
William Low	0	12	6
Thomas Lindsay	0	5	0
James Leitch	0	3	0
Mrs. Morison	5	0	0
Mrs. Millar	2	2	0
James Mitchell	11	6	0
Rev. Mr. Mollison ...	11	0	6
Rev. Mr. Mitchell ...	3	3	0
Bailie A. Milne	9	8	6
James Morison	4	7	6
Bailie John Milne ...	2	2	0
Alexander Morison ...	3	17	0
John Mather	£2	12	6
William Morison	1	1	0
James Mill	2	16	0
D. Mill	1	1	0
Henry Mill	0	5	0
John Mill	2	1	0
John Millar	10	8	0
Dr. Mill's Daughters ...	1	2	0
George Mill, Esq.	1	1	0
Alexander Millar	0	15	6
William Morrison	0	5	0
George Mackay	2	2	0
Mr. and Mrs. Millar ...	1	1	0
Daniel Macfell	1	6	0
Robert Millar	1	1	0
Rev. Mr. Nisbet	8	8	0
Robert Napier	6	6	0
John Norrie	2	0	0
John Ouchterlony ...	1	1	0
Miss M. Ouchterlony ...	0	5	0
John Ogilvie	1	1	0
Rev. Mr. Palmer	3	3	0
A. Paterson jun.	2	0	0
Mrs. Pyott	2	2	0
Mrs. Petrie	2	2	0
Alexander Petrie	3	6	6
William Petrie	0	5	0
Bailie A. Paterson ...	8	3	0
James Paton, Esq. ...	5	5	0
George Paton	3	18	0
Henry Renny	10	10	0
James Renny, Esq. Jamaica,	5	5	0
Mrs. Renny, brewer ...	0	10	0
Miss E. Renny	2	2	0
Miss H. Renny	1	1	0
Thomas Renny	1	0	0
Miss Peggy Renny ...	0	10	6
James Renny, Esq. ...	5	0	0
Captain James Renny ...	2	7	0
Mr. Renny, Borrowfield ...	0	10	0
Robert Renny	6	0	0
Provost G. Ross	5	0	0
William Ross	8	8	0
John Ross	8	8	0
H. Ross	2	2	0
James Ross	0	10	6
Mrs. Jean Ross	1	1	0
Thomas Ruthven	4	4	0
Miss E. Reynold	1	1	0
James Robertson	3	18	0
John Robertson	0	15	6
William Robb	1	5	0
William Ramsay	0	10	0
John Ritchie	0	2	6
Mr. Reay	0	5	0
Robert Scott, Esq. Logie ...	2	0	0
R. Stephen, Esq.	5	5	0
Mrs. Stephen	2	0	0
Captain Shanks, R.N. ...	5	5	0
Captain Smith, Hedderwick,	2	12	6
Robert Strachan	6	16	6
Miss B. Strachan	1	5	0
Charles Strachan	1	1	0
Lieutenant Strachan ...	10	10	0

D. Shand	£3	1	0	Daniel Watt	£2	11	6
D. Scott, brewer	1	0	0	David Walker	1	1	0
Charles Spark	1	15	0	Charles Winter	1	1	0
Thomas Scott, Esq. ...	1	1	0	David Whyte	1	1	0
Captain Scott	1	6	0	John Watson	0	10	0
Thomas Scott, Esq. ...	1	1	0	Young & Shand	3	12	0
James Scott, Esq.	3	3	0	Thomas Young	1	1	0
Alexander Scott, Birkhill,	1	1	0	Dr. Young	5	0	0
Captain Shuttleworth ...	1	1	0	Mr. Nisbet and Mr. Addison collected	10	10	6
R. Taylor, Esq. Borrowfield,	4	4	0				
Charles Thomson	4	14	6	Messrs. Ouchterlony and Nisbet collected ...	9	10	6
John Torry	1	6	0				
Mrs. Taylor	1	0	0	Mr. Mollison and Mr. Addison collected ...	2	13	0
Captain Valantyne ...	2	0	0				
Provost Webster	7	12	6	Bailie Paterson and Charles Thomson collected	25	8	3
Mrs. Captain Wilkie ...	3	3	0				
John Wallace	9	9	0	Unknown Friends ...	4	10	4
George Watson	1	16	6		£668	6	7

ADDITIONAL DONATIONS AND LEGACIES,

From June 1831 to June 1839.

A Friend to the late Isobel Smith, a Patient in the Infirmary ...	£5	0	0
Alexander Stratton, Esq. Broomley	1	1	0
The late Mrs. Williamson Burnett of Monboddo	8	3	0
Right Hon. Earl of Kintore	25	0	0
The late Earl of Northesk	28	3	9
The late George Cooper, Esq. Slateford	39	5	6
John Temple Leader, Esq. London, M.P.	10	0	0
William Reid, student of medicine, Montrose	1	1	0
The Executors of George Cooper, and other Relations of George Lindsay, to keep him during his Life	100	0	0
The late Miss Jean Thomson, Montrose	98	10	6
David Wyllie, student of medicine	0	10	4
Receiving Box at the Asylum	1	1	6
	£317	16	7

CONTRIBUTIONS BY TOWNS, PARISHES, AND CONGREGATIONS,

IN SUPPORT OF THE

ROYAL LUNATIC ASYLUM, INFIRMARY, & DISPENSARY, OF MONTROSE.

Towns, Parishes, and Congregations.	First or Old List.	Additional up to 1st June 1830.	From 1st June 1830, to 1st June 1839.	Total.
Aberlemno, Parish of ...	£6 1 2	...	£31 0 9	£37 1 11
Abernethy, ,, ...	2 0 0	...	...	2 0 0
Airlie, ,, ...	2 8 8	...	...	2 8 8
Alyth, ,, ...	4 1 0	...	...	4 1 0
Arbirlot, ,, ...	6 0 6	...	...	6 0 6
Arbroath, ,, ...	8 0 0	...	...	8 0 0
———, Town of ...	39 17 6	...	...	39 17 6
———, Chapel of ...	9 17 0	...	...	9 17 0
———, Independent Church	5 0 0	...	...	5 0 0
Arbuthnott, Parish of ...	3 6 1	...	...	3 6 1
Auchterhouse, ,, ...	3 14 0	...	...	3 14 0
Barry, ,, ...	3 0 0	...	...	3 0 0
Bendochy, ,, ...	1 14 0	...	...	1 14 0
Benholm, ,, ...	13 16 9	£8 0 0	77 17 6	99 14 3
Bervie, Town and Parish of	1 19 1	...	...	1 19 1
Blairgowrie, Parish of ...	4 2 0	...	...	4 2 0
Brechin, ,, ...	14 14 2	...	...	14 14 2
———, Town of ...	27 6 0	...	...	27 6 0
Carmyllie, Parish of ...	5 8 8	...	...	5 8 8
Careston, ,, ...	3 6 0	2 0 0	9 9 0	14 15 0
Cortachy & Clova, Parish of	1 12 2	...	...	1 12 2
Craig, ,,	13 5 0	6 0 0	45 17 8	65 2 8
Coupar-Angus, ,,	3 0 0	...	...	3 0 0
Dun, ,,	1 3 0	3 14 1	...	4 17 1
Dundee, Town of ...	164 9 6	...	...	164 9 6
———, Independent Meeting	15 0 0	...	...	15 0 0
Dunnottar, Parish of ...	2 8 2	...	...	2 8 2
Edzell, ,, ...	11 7 0	26 0 0	38 12 6	75 19 6
Eassie, ,, ...	4 9 6	...	...	4 9 6
Farnell, ,, ...	7 16 7	...	...	7 16 7
Fearn, ,, ...	3 10 0	...	...	3 10 0
Fettercairn, ,, ...	14, 0 2	12 9 0	38 16 4	65 5 6
Fetteresso, ,, ...	2 10 0	...	...	2 10 0
Fordoun, ,, ...	5 5 0	2 2 0	...	7 7 0
Forfar, Town of ...	42 0 0	...	...	42 0 0
Garvock, Parish of ...	4 0 0	...	17 2 0	21 2 0
Glammis, ,, ...	5 2 6	...	...	5 2 6
Glenbervie, ,, ...	2 0 3	...	...	2 0 3
Guthrie, ,, ...	3 0 0	...	...	3 0 0
Inchture, ,, ...	25 15 0	...	...	25 15 0
Inverarity, ,, ...	4 0 0	...	...	4 0 0
Inverkeillor, ,, ...	23 15 5	10 9 3	37 12 10	71 17 6
Johnshaven, Associate Con. of	...	...	3 2 6	3 2 6
Kingoldrum, Parish of ...	1 4 0	...	...	1 4 0
Kinnaird, ,, ...	3 0 0	...	...	3 0 0
Kinneff, ,, ...	1 3 4	...	...	1 3 4
Kinnell, ,, ...	7 10 0	...	24 12 3	32 2 3
Kinnettles, ,, ...	2 5 0	...	...	2 5 0
Kirkden, ,, ...	6 0 0	...	...	6 0 0
Kirriemuir, ,, ...	13 10 9	...	...	13 10 9
Laurencekirk, ,, ...	2 0 0	5 1 0	48 10 0	55 11 0
Lethnot, ,, ...	3 0 0	...	17 5 0	20 5 0
Liff, ,, ...	4 11 0	...	...	4 11 0

CONTRIBUTIONS BY TOWNS, PARISHES, &c. (CONTINUED.)

Towns, Parishes, and Congregations.	First or Old List.	Additional up to 1st June 1830.	From 1st June 1830, to 1st June 1839.	Total.
Lochlee, Parish of ...	£4 0 0	...	£3 2 0	£7 2 0
Logie, ,, ...	21 6 10	£8 2 0	40 15 0	70 3 10
Longforgan, ,, ...	3 16 0	...	...	3 16 0
Lunan, ,, ...	3 0 0	3 5 6	...	6 5 6
Lundie, ,, ...	3 14 10	...	...	3 14 10
Mains, ,, ...	3 3 0	...	...	3 3 0
Marykirk, ,, ...	4 3 3	8 7 2	33 0 1	45 10 6
Maryton, ,, ...	10 0 0	4 0 0	2 0 0	16 0 0
Meigle, ,, ...	7 7 0	...	...	7 7 0
Menmuir, ,, ...	4 0 0	...	3 0 0	7 0 0
Monikie, ,, ...	5 5 0	...	...	5 5 0
Monifieth, ,, ...	3 1 8	...	...	3 1 8
Murroes, ,, ...	4 1 7	...	...	4 1 7
Montrose, Town of ...	100 10 0	...	...	100 10 0
———, From J. Mill's Mort.	225 0 0	...	...	225 0 0
———, Kirk-Session of ...	247 12 11	25 5 4	...	272 18 3
———, Chapel (En. Epis.) of	94 6 6	...	...	94 6 6
———, 1st Associate Con. of	4 19 8	...	6 0 0	10 19 8
———, Independent Meet. of	2 10 0	...	...	2 10 0
———, Parish of ...	...	...	145 7 7	145 7 7
———, St. John's Church of	...	...	14 9 2	14 9 2
———, 2d Associate Con. of	...	...	6 8 0	6 8 0
Newtyle, Parish of ...	2 0 0	...	...	2 0 0
Oathlaw, ,, ...	4 7 6	...	...	4 7 6
Panbride, ,, ...	4 4 0	...	...	4 4 0
Perth, Town of ...	60 0 0	...	...	60 0 0
———, Antiburg. Ass. Con. of	14 3 0	...	...	14 3 0
Rescobie, Parish of ...	5 10 0	...	...	5 10 0
Ruthven, ,, ...	2 4 0	...	...	2 4 0
St. Cyrus, ,, ...	13 16 8	12 12 0	35 18 0	62 6 8
St. Vigeans, ,, ...	8 0 0	...	...	8 0 0
Strathmartin, ,, ...	3 8 0	...	...	3 8 0
Stracathro, ,, ...	13 3 0	...	...	13 3 0
Sauchieburn Society, ...	3 3 9	...	...	3 3 9
Tannadice, Parish of ...	10 10 0	...	...	10 10 0
Tealing, ,, ...	4 13 0	...	...	4 13 0
£	1470 7 1	137 7 4	679 18 2	2287 12 7
Of which, from Montrose ... £	674 19 1	25 5 4	172 4 9	872 9 2
———, —— other places,	795 8 0	112 2 0	507 13 5	1415 3 5
£	1470 7 1	137 7 4	679 18 2	2287 12 7

PARTICULARS OF THE ROYAL LUNATIC ASYLUM'S PROFIT AND LOSS ACCOUNT,

Since Mr. D. Hill was appointed Treasurer, up to 1st June 1839.

For the Year	Paid for Household Expences.	Expense of Charter.	Gratuity to Jas. Booth.	Loss.	Received for Lunatic Boarders.	Sickward Boarders.	Interest.	Donations.	Labour by Inmates.	Profits.
1810	£1169 1 8	...	...	...	£932 13 2	£8 6 0	£278 0 1	£58 3 0	...	£108 0 6
1811	1625 11 0	£227 18 5	...	£276 11 6	1197 15 7	24 9 0	343 7 4	11 6 0	...	...
1812	976 11 1	...	...	...	749 10 10	13 4 0	336 14 0	216 11 3	...	344 9 0
1813	956 11 0	...	...	...	754 12 5	24 3 8	334 6 9	74 19 0	...	199 17 0
1814	1076 14 7	...	...	...	776 17 8	18 2 0	381 2 11	7 2 0	...	106 5 0
1815	982 4 6	...	...	...	773 13 10	6 10 0	401 2 4	12 2 0	...	216 3 8
1816	963 2 0	...	...	...	841 3 10	16 1 0	405 0 4	133 3 0	...	437 11 2
1817	1002 2 10	...	...	...	809 12 8	2 16 0	412 6 4	6 1 0	...	228 13 2
1818	1033 17 10	...	...	...	834 0 11	3 0 0	371 5 2	94 13 3	...	264 1 6
1819	1216 12 8	...	...	...	917 3 3	1 0 0	327 5 11	95 3 6	...	124 0 0
1820	1375 8 3	...	...	29 18 0	939 2 2	28 10 0	318 14 1	9 4 0	...	...
1821	1136 12 3	...	...	...	855 16 8	26 3 6	320 0 8	31 19 2	...	...
1822	847 5 6	...	...	...	897 3 0	29 17 0	322 4 10	5 5 0	...	97 7 9
1823	866 15 2	...	£100 0 0	...	835 19 0	29 14 6	301 2 4	4 4 0	...	407 4 4
1824	859 18 5	...	...	...	830 13 8	44 9 6	293 9 2	4 4 0	...	204 4 8
1825	1021 9 7	...	...	...	902 10 7	5 13 0	322 12 4	6 13 0	...	312 17 11
1826	1200 19 2	...	10 0 0	...	859 2 8	8 6 6	289 1 0	108 13 7	...	215 19 4
1827	1464 1 2	...	10 0 0	267 4 7	888 9 8	25 11 3	283 11 8	4 4 0	...	54 4 7
1828	1297 4 8	...	10 0 0	13 8 0	989 13 4	22 17 6	266 12 2	2 16 8	...	...
1829	1166 18 10	...	10 0 0	...	950 18 10	9 13 6	235 17 7	18 4 2	...	...
1830	1304 14 3	...	10 0 0	...	1011 6 5	1 15 6	243 6 1	299 14 8	...	37 15 3
1831	1457 3 9	...	10 0 0	102 11 2	1084 13 10	0 11 0	208 19 3	70 8 6	...	246 8 5
1832	1280 4 7	...	25 0 0	...	1033 4 3	1 4 6	198 3 9	79 1 4	...	...
1833	1346 4 4	...	10 0 0	...	1164 17 10	3 3 8	200 17 7	122 14 9	...	56 9 3
1834	1230 9 1	...	10 0 0	...	1120 18 6	0 13 6	180 6 8	78 14 0	...	135 9 6
1835	1374 11 7	...	40 5 0	...	1064 5 10	1 10 0	200 14 4	204 3 0	...	140 3 7
1836	1344 12 11	...	10 0 0	...	1102 2 6	6 9 0	188 10 5	92 4 1	...	55 16 7
1837	1406 4 3	...	10 0 0	80 3 6	1062 13 6	5 10 0	185 9 1	82 8 2	...	34 13 1
1838	1557 11 4	...	10 0 0	...	1321 2 1	13 1 0	205 19 11	155 15 7	£29 16 2	...
1839	1611 9 7	...	10 0 0	...	1295 12 1	31 18 0	202 17 9	112 5 4	20 5 2	158 3 5
										41 8 9

Dr. STOCK ACCOUNT OF THE ROYAL LUNATIC

1811. Jan. 1.	To Loss for bygone year					£127	3	11
June 10.	,, do. to this date					149	7	7
1820. June 1.	,, do. for bygone year					29	18	0
1826. June 13.	,, do. on new Valuation of Houses and Furniture, which, including the original Value put on them at the 1st January 1809, and including Additions and Alterations since that time, stood in the books at	£6913	17	1				
	But were only valued as now worth	5000	0	0				
	Deficiency in value					1913	17	1
1827. June 1.	To Loss for bygone year					267	4	7
1828. June 1.	,, do. on new Valuation of Houses and Furniture, which, including Additions since last Valuation, stood in the books at	5978	1	5				
	But are only now supposed worth	5900	0	0				
	Deficiency in value					78	1	5
	To Loss for bygone year					13	8	0
1830. June 1.	To Stock at this date, viz.:							
	Surgical Instruments	40	4	8				
	Houses, Buildings, & Furniture,	5992	0	0				
	Sir Alexander Ramsay's Bond,	6000	0	0				
	Medicines on hand	22	6	1				
	Provisions on hand	31	13	7				
	The National Bank of Scotland,	353	0	0				
	Cash in Treasurer's hands	0	19	11				
						12440	4	3
						£15019	4	10
1831. June 1.	To Loss for bygone year					£102	11	2
1837. June 1.	,, do. do.					80	3	6
1839. June 1.	,, Paid Subscription to New Infirmary					1000	0	0
	,, Stock at this date, viz.:							
	Surgical Instruments	£65	7	9				
	Seats in the Parish Church	20	0	0				
	The Town of Montrose, ℔ bonds,	4000	0	0				
	Manufactured Goods on hand,	125	18	0				
	Medicines ,,	16	0	0				
	Provisions ,,	75	15	10				
	Outstanding Boards	17	2	0				
	Houses, Buildings, & Furniture,	7012	14	2				
	The National Bank of Scotland,	546	0	0				
	Cash in Treasurer's hands	0	16	0				
						11879	13	9
						£13062	8	5

Montrose, 1st June 1839.

ASYLUM, INFIRMARY, AND DISPENSARY. Cr.

1809. Jan. 1.	By Donations and Legacies since the foundation of the Institution in 1781, to this date	£7897	4	0				
	,, Excess of Income above the Expenditure	1515	1	2½				
	Stock when D. Hill entered as Treasurer				£9412	5	2½	
	As follows, viz. :							
	By Bonds and Bill	6100	0	0				
	James Paton, Esq., Treasurer—Balance of Cash in his hands	191	5	2½				
	Houses, Buildings, and Furniture	3100	0	0				
	Surgical Instruments	21	0	0				
	Amount as above	£9412	5	2½				
1810. Jan. 1.	By Profit for bygone year				108	0	6½	
1812. June 8.	,, do. do.	£344	9	0				
	,, Arrears of Board brought forward to this date	450	14	11				
	,, Medicines on hand	4	14	1				
	,, Provisions ,,	52	9	0				
		£852	7	0				
	Deduct Debts due by the Institution	123	10	5				
					728	16	7	
1813. June 1.	By Profit for bygone year				199	17	0	
1814. June 1.	,, do. do.				106	5	0	
1815. June 1.	,, do. do.				216	8	8	
1816. June 1.	,, do. do.				487	11	2	
1817. June 2.	,, do. do.				228	13	2	
1818. June 1.	,, do. do.				264	1	6	
1819. June 1.	,, do. do.				124	0	0	
1821. June 1.	,, do. do.				97	7	9	
1822. June 1.	,, do. do.				407	4	4	
1823. June 1.	,, do. do.				204	4	8	
1824. June 1.	,, do. do.	£312	17	11				
	,, do. on Sale of Govern. 4 per Cents.	1567	3	9				
					1880	1	8	
1825. June 1.	,, do. for bygone year				215	19	4	
1826. June 1.	,, do. do.				54	4	7	
1829. June 1.	,, do. do.				37	15	3	
1830. June 1.	,, do. do.				246	8	5	
					£15019	4	10	
	By Stock at this date brought down				£12440	4	3	
1832. June 1.	By Profit for bygone year				56	9	3	
1833. June 1.	,, do. do.				135	9	6	
1834. June 1.	,, do. do.				140	3	7	
1835. June 1.	,, do. do.				55	16	7	
1836. June 1.	,, do. do.				34	13	1	
1838. June 1.	,, do. do.				158	3	5	
1839. June 1.	,, do. do.				41	8	9	
					£13062	8	5	

(Errors excepted.) DAVID HILL, Treasurer.

WARRANT UNDER HIS MAJESTY'S SIGN MANUAL, AND CHARTER UNDER THE GREAT SEAL,

ERECTING

THE MANAGERS OF THE LUNATIC ASYLUM, INFIRMARY, AND DISPENSARY OF MONTROSE, INTO A BODY CORPORATE AND POLITIC,

BY THE NAME AND TITLE OF

ROYAL LUNATIC ASYLUM, INFIRMARY, & DISPENSARY OF MONTROSE.

GEORGE R.

Our Sovereign Lord considering, That an humble petition hath been presented to his Majesty, by Patrick Craigie, Esq., Provost of his Majesty's ancient burgh of Montrose, for himself, and in behalf of the other Managers of the Lunatic Asylum, Infirmary, and Dispensary at Montrose, stating,—That, in the year 1779, the Magistrates, and many of the most respectable Heritors and Inhabitants of the Town of Montrose, and its neighbourhood, deeply impressed with a sense of the sufferings and distress to which many individuals and families were subjected, from the want of a proper Asylum for Lunatics, and of an Hospital for the reception of sick and diseased patients in indigent circumstances, formed the laudable resolution of providing some remedy. The scheme being warmly supported by contributions, the Magistrates, and other respectable persons chosen from the contributors to be Managers, were soon enabled to erect and open a large and commodious building, containing apartments suited to these several purposes, with extensive gardens, in the Links of Montrose. In a few years afterwards, a Dispensary was added to the establishment.—That during the thirty years the Institution has now existed, several hundreds of patients have been received into the house, of whom a great proportion has been cured, and many materially relieved by the medical and chirurgical assistance afforded them. At present it contains no fewer than 60 patients; and many applications for admission lie over from want of room.—That the Petitioner and the other Managers are advised, and do most firmly believe, from the experience they have had, that if they, and their successors, shall be invested with corporate powers, the Institution will continue to flourish; their charitable designs will be rendered more beneficial and extensive; and their funds be increased and secured.—And therefore, most humbly *praying*, That his Majesty would be graciously pleased to grant, to the Managers of the said Institution, his Royal Charter, incorporating them, and their successors who shall be chosen into the management of the affairs of the said Institution, into a body politic and corporate, by the name of "*The Royal Lunatic Asylum, Infirmary, and Dispensary of Montrose;*" with a perpetual succession, and power to use a common seal; to receive donations and legacies; to purchase lands; vest money in the Government Funds; to erect houses and buildings; to sue and to be sued; and to make Bye-Laws, and other Ordinances and Regulations; and with all other usual and necessary powers, not repugnant to the laws of the realm.—And his Majesty, being willing to give every encouragement and support to an undertaking so very laudable, does therefore ordain a Patent or Charter to be passed and expede, under the Seal appointed by the Treaty of Union to be kept and used in Scotland, in place of the Great Seal formerly used there, constituting, erecting, and incorporating, as his Majesty, by his prerogative Royal and special grant, for himself, and his Royal successors, hereby constitutes, erects, and incorporates the said Patrick Craigie, Esq., and all others the Managers of the said Institution, and those who shall afterwards be appointed Managers of the said Institution, into one body corporate and politic, under the name and title of "*The Royal Lunatic Asylum, Infirmary, and Dispensary of Montrose;*" under which name they shall have perpetual endurance and succession, and the privilege of using a common seal; and they shall be legally entitled to hold, purchase, and enjoy lands, tenements, and any

other heritable property in Scotland, not exceeding, in yearly value, the sum of £1000 sterling; also to receive legacies and donations; to hold goods and chattels, and to invest money in the Public or Government Funds; and to erect buildings for the uses and purposes of the said Institution: And farther, to sue and be sued in the same manner as any other body corporate and politic; to make and constitute such Bye-Laws, Ordinances, and Regulations, for the management and government of the affairs of the said Incorporation, as to them shall seem meet, providing the same be not contrary to the true intent and meaning hereof, nor repugnant to the laws of this realm. And his Majesty does hereby ratify, confirm, and approve of the whole Bye-Laws, Ordinances, and Regulations of the said Institution hitherto made, in so far as the same are at present in observance, conducive to the interest and welfare of the Institution, and not repugnant to the laws of the realm. But notwithstanding of this ratification, it shall be in the power of the Managers, at any of the Annual Meetings herein after appointed, not only to alter or innovate the said existing Bye-Laws, but even to rescind the same, *in toto*, if they shall see good cause, and to substitute in their place others which shall appear better calculated to promote the interest and welfare of the Institution. And for the better managing the affairs of the said Institution, his Majesty does hereby appoint and ordain, that the same shall be governed and directed by the Provost and Eldest Bailie of Montrose for the time being, and by forty-eight other Managers, (excepting in the events of the said Provost and Eldest Bailie, or either of them happening previously to their or his election into these offices, to have been Managers, in which events the number shall be only forty-six or forty-seven, as the case may be, so that the total number of Managers shall never exceed fifty, nor be fewer than forty-eight,) and any seven of the said Managers shall be a quorum; and these Managers shall consist of the said Provost and the said eldest Bailie of Montrose for the time being; the First and Second Ministers of Montrose for the time being; thirty Managers elected from the inhabitants of the said Burgh of Montrose, (including the said Provost and Eldest Bailie, or either of them, if they or either of them shall have been Managers previous to their election into these offices); and the remainder shall always consist of eleven Gentlemen of landed property, and five Clergymen of the Established Church of the parishes in the neighbourhood of Montrose; and that the Provost of Montrose, and in his absence the Senior Bailie, and in the absence of both of these Magistrates, the person who shall be chosen by a majority of votes, shall be President of every Meeting of the Managers; and in all cases where the votes shall be equal, the President shall have a casting or decisive vote over and above his own proper vote as a Manager of the Corporation. And his Majesty does further ordain, that the following persons shall be Managers of the said Institution from and after the date hereof, viz.:—The Provost of Montrose, the Eldest Bailie of Montrose, the First Minister and Second Minister of Montrose, all for the time being; Sir Alexander Ramsay of Balmain, Bart.; Hercules Ross of Rossie, Esq.; David Lyall of Gallery, Esq.; John Duncan of Rosemount, Esq.; James Cruikshank of Langley Park, Esq.; Charles Scott of Criggie, Esq.; John Brand of Lauriston, Esq.; James Ford of Finhaven, Esq.; David Carnegy of Craigo, Esq.; George Robertson Scott, of Benholm, Esq.; Alexander Renny Tailyour of Borrowfield, Esq.; the Rev. James Brewster of Craig; the Rev. Andrew Fergusson of Maryton; the Rev. James Trail of St. Cyrus; the Rev. John Gowans of Lunan; the Rev. William Burns of Dun; the Rev. John Dodgson of St. Peter's Chapel of Montrose; the Rev. Patrick Cushnie of the Scotch Episcopal Chapel of Montrose; Patrick Craigie, William Ross, Andrew Thom, Samuel Guise, John Thomson, Alexander Airth, and William Mudie, Esqrs., all residing in Montrose; James Paton, Esq., Collector of the Customs at Montrose; Doctors James Ross, M'Naughtan Hunter, John Bate, William Gibson, David Paterson, David Alexander, and Robert Crabb, all physicians in Montrose; Charles Thomson, Esq., Town-Clerk of Montrose; Colin Alison, Esq., writer there; Alexander Paterson, William Sharp, John Barclay, James Dickson, Andrew Nicol, John Paton, George Paton, John Beattie, John Brown, and Thomas Dougal, Esqrs., all merchants in Montrose; and William Low, Kirk-Treasurer of Montrose. But although any of the individuals before-named do presently hold, or shall hereafter happen to be elected into the said office of Provost or Eldest Bailie, that circumstance shall give them no title to vote in both capacities. And his Majesty does further appoint, that the Managers do meet within the Town-Hall of Mon-

trose, on Tuesday, in the second week of the month of June, annually, for the purpose of making Bye-Laws, for auditing of accounts, and for the election of Managers, in the room of such as may have died, resigned, or otherwise have been removed from the management during the course of the year preceding; and besides the said General Annual Meeting, the said Managers, or a quorum of them, shall meet once every month, for directing the ordinary business of the Institution. And his Majesty does further ordain, that it shall be in the power of the said Managers to appoint a Treasurer and Clerk, and such other officers, either medical or otherwise, as they shall think fit for conducting the affairs of the said Institution, and to allow them such salaries as shall seem reasonable, and to invest them with such powers as shall appear necessary for carrying on the business of the Institution, and to remove them at pleasure, and appoint others in their places. And further, that when any proposal or motion shall be made, either at a General or Monthly Meeting of the Managers, for the investment of any part of the Funds, or for the erection of any Building to any extent beyond £100 sterling, or that any person in the management be employed to furnish articles of any description to, or for the use of the Institution, the same shall be entered in the minutes of that Meeting, which shall have no power to decide, determine, or settle the same; but it shall be the duty of the Clerk, within eight days thereafter, to notify the said propositions or motions, by circular letters, to the whole Managers of the said Institution, not present at the Meeting when the same shall be so made and entered, in order that they may attend next Meeting, and vote and determine thereon. And his Majesty further wills, directs, and appoints, that no person holding any office under the Managers, and receiving a salary from them for his services, shall be eligible to the office of Manager, nor shall he have any vote or concern whatever in the management. And in case any of the Managers shall accept of any such office, and take salary for his services, he shall, *ipso facto*, forfeit his right to the office of Manager, and shall not be eligible thereto so long as he shall hold any such office. And his Majesty, for himself, and his Royal Successors, declares, That these his Majesty's Letters-Patent shall be in and by all things valid and effectual in law, according to the true intent and meaning of the same, and shall be taken, construed, and adjudged in the most favorable and beneficial manner, for the best advantage of the said Incorporation, notwithstanding any mis-recital, defect, uncertainty, or imperfection in these his Majesty's Letters-Patent; and his Majesty doth for himself, and his Royal Successors, covenant, grant, and agree to and with the said Corporation or Body Politic, and their successors, that his Majesty, his heirs and successors, shall and will from time to time, and at all times hereafter, upon the humble suit and request of the said Incorporation, and their successors, give and grant unto them all such further and other privileges, authorities, matters, and things, for rendering more effectual his Majesty's grant, according to the true intent and meaning of these presents, which he or they can or may lawfully grant, and shall be reasonably advised and devised by Counsel learned in the law of the said Corporation for the time being, and shall be approved of by the Lord Advocate and Solicitor-General in Scotland, of his Majesty, his heirs and successors, in his or their behalf. And his Majesty ordains the said Charter to be passed under the foresaid Seal, *per saltum*, and without passing any other Seal, for which these presents shall be to the Directors of his Majesty's Chancery, as well as to the Keeper of the said Seal, a sufficient warrant. Given at his Majesty's Court, at St. James's, the 20th day of October, 1810, in the 50th year of his Majesty's reign.

By his Majesty's command,

(Signed) M. RYDER.

INFIRMARY PATIENTS.*

	Years.	Admitted.	Cured.	Relieved.	Died.		Years.	Admitted.	Cured.	Relieved.	Died.
Year ending 30th June...	1802	21	15	1	2	Brought up...		642	379	102	63
	1803†	26	21	0	5	Year ending	1821	52	31	12	4
	1804	32	20	5	5	31st May...	1822	65	31	18	4
	1805	27	11	6	4		1823	44	31	10	2
	1806	22	9	6	1		1824	53	38	10	3
	1807	27	18	4	1		1825	77	35	26	6
	1808	30	13	4	6		1826	66	51	9	8
	1809	22	10	3	4		1827	82	64	14	4
	1810	30	12	9	0		1828	38	25	9	2
Year ending 31st May....							1829	87	58	25	6
	1811	37	20	8	2		1830	99	67	12	6
	1812	36	25	1	1		1831	134	98	31	6
	1813	46	31	3	4		1832	90	62	31	9
	1814	32	11	8	6		1833	113	74	17	9
	1815	36	25	8	6		1834	93	58	15	6
	1816	32	15	11	5		1835	83	56	0	11
	1817	41	22	0	2		1836	74	54	8	5
	1818	24	15	0	2		1837	96	69	12	11
	1819	58	40	10	3		1838	81	63	8	5
	1820	63	46	15	4		1839	78	65	3	8
		642	379	102	63			2147	1409	372	178

Allowing for the period anterior to 1802, as per foot note, 253

We have.....2400 as the Total Number of Patients admitted,—and of which, fully *one-third*, or 800, may be allotted to Montrose.

According to the published Report of a Committee, 1836, p. 4, "the rate of increase in the number of Patients received into the Infirmary," during a period of twenty years, was as follows:

	Total Number of Patients.	Average Total Number each Year.
"In the 7 years ending June 1820.....	280	40
,, 7 ,, ,, 1827.....	427	61
,, 7 ,, ,, 1834.....	655	95"
—But, in place of continuing to advance during the subsequent five years, the average was fully 10 lower than the last mentioned; for, adding 12 of *remaining* cases to the *admitted*, we have.....	424	84 4-5ths.

The Committee were aware (p. 9, Appendix No. 1.) that the average in 1835 and 1836 reached only 88, but could not foresee its declension in the three following years; while, on the other hand, the material increase of number during 1840, as shown by last Report, with what may be expected from its successor, will probably confirm their general opinion.

* Previously to 1802, when (July 6th) Dr. Paterson produced a "Recapitulation of the different operations, &c. performed at the Hospital during the period of his and Dr. Hunter's joint attendance," the numbers of Patients admitted into the Infirmary, Cured, &c., do not appear to have been regularly kept, or, at least, reported, as in the case of the Dispensary. Supposing them to have averaged 15 yearly, which is probably less than the real amount, we may safely add 300 to the product of this Table.

† The report for this year, reaching only to 1st February, leaves several months unaccounted for.

PROFIT AND LOSS ON INFIRMARY,

During Five Years, at the Rate of One Shilling per Diem each Patient.

Par.	Years.	Pats.	Days in	Collections.	Charge.	Gain.	Loss.	In favor of Charity.	Against Charity.
1. Aberlemno.	1835...	0	0	£4 10 0	£ ...	£4 10 0	£ ...	£ ...	£ ...
	1836...	1	34	3 0 0	1 14 0	1 6 0	...		
	1837...	1	21	2 8 6	1 1 0	1 7 6	...		
	1838...	4	271	3 12 0	13 11 0	...	9 19 0		
	1839...	2	37	3 0 3	1 17 0	1 3 3	...		
	Total	8	363	16 10 9	18 3 0	8 6 9	9 19 0	...	1 12 3
2. Benholm.	1835...	5	126	10 5 6	6 6 0	3 19 6	...		
	1836...	2	70	8 12 0	3 10 0	5 2 0	...		
	1837...	2	42	8 3 0	2 2 0	6 1 0	...		
	1838...	5	210	8 5 6	10 10 0	...	2 4 6		
	1839...	2	44	8 5 6	2 4 0	6 1 6	...		
	Total	16	492	43 11 6	24 12 0	21 4 0	2 4 6	18 19 6	
3. Careston.	1835...	0	0	1 10 0	...	1 10 0	...		
	1836...	1	9	1 0 0	0 9 0	0 11 0	...		
	1837...	0	0	...	...	...	...		
	1838...	0	0	1 0 0	...	1 0 0	...		
	1839...	0	0	...	...	...	...		
	Total	1	9	3 10 0	0 9 0	3 1 0	...	3 1 0	
4. Craig.	1835...	5	175	5 8 0	8 15 0	...	3 7 0		
	1836...	7	434	5 14 11	21 14 0	...	15 19 1		
	1837...	8	509	6 6 0	25 9 0	...	19 3 0		
	1838...	7	294	5 18 3	14 14 0	...	8 15 9		
	1839...	5	267	7 9 0	13 7 0	...	5 18 0		
	Total	32	1679	30 16 2	83 19 0	...	53 2 10	...	53 2 10
5. Edzell.	1835...	0	0	4 12 0	...	4 12 0	...		
	1836...	0	0	4 8 6	...	4 8 6	...		
	1837...	0	0	4 5 0	...	4 5 0	...		
	1838...	1	22	4 4 0	1 2 0	3 2 0	...		
	1839...	0	0	3 14 0	...	3 14 0	...		
	Total	1	22	21 3 6	1 2 0	20 1 6	...	20 1 6	
6. Fettercairn.	1835...	1	55	3 4 0	2 15 0	0 9 0	...		
	1836...	0	0	4 10 0	...	4 10 0	...		
	1837...	0	0	4 7 10	...	4 7 10	...		
	1838...	1	61	4 14 6	3 1 0	1 13 6	...		
	1839...	2	24	5 1 6	1 4 0	3 17 6	...		
	Total	4	140	21 17 10	7 0 0	14 17 10	...	14 17 10	
7. Garvock.	1835...	1	14	2 2 0	0 14 0	1 8 0	...		
	1836...	0	0	1 19 0	...	1 19 0	...		
	1837...	1	44	1 13 0	2 4 0	...	0 11 0		
	1838...	0	0	1 18 0	...	1 18 0	...		
	1839...	0	0	1 14 0	...	1 14 0	...		
	Total	2	58	9 6 0	2 18 0	6 19 0	0 11 0	6 8 0	
8. Inverkeilor.	1835...	7	199	3 0 0	9 19 0	...	6 19 0		
	1836...	3	99	4 10 0	4 19 0	...	0 9 0		
	1837...	1	17	6 3 4	0 17 0	5 6 4	...		
	1838...	0	0	5 6 0	...	5 6 0	...		
	1839...	0	0	...	...	...	...		
	Total	11	315	18 19 4	15 15 0	10 12 4	7 8 0	3 4 4	
9. Kinnell.	1835...	0	0	4 0 0	...	4 0 0	...		
	1836...	1	33	2 18 9	1 13 0	1 5 9	...		
	1837...	0	0	3 3 0	...	3 3 0	...		
	1838...	0	0	3 8 0	...	3 8 0	...		
	1839...	3	37	2 12 0	1 17 0	0 15 0	...		
	Total	4	70	16 1 9	3 10 0	12 11 9	...	12 11 9	
10. Lau.kirk.	1835...	3	113	7 0 0	5 18 0	1 2 0	...		
	1836...	3	62	6 10 0	3 2 0	3 8 0	...		
	1837...	2	113	6 0 0	5 13 0	0 7 0	...		
	1838...	2	26	6 0 0	1 6 0	4 14 0	...		
	1839...	3	27	5 0 0	1 7 0	3 13 0	...		
	Total	13	346	30 10 0	17 6 0	13 4 0	...	13 4 0	

PROFIT AND LOSS ON INFIRMARY, (CONTINUED.)

Par.	Years.	Pats.	Days in	Collections.	Charge.	Gain.	Loss.	In favor of Charity.	Against Charity.
				£ ...	£ ...	£ ...	£ ...	£ ...	£ ...
11. Lethnot.	1835...	0	0						
	1836...	0	0	...	...	...	...		
	1837...	1	66	3 7 0	3 6 0	0 1 0	...		
	1838...	0	0	2 15 0	...	2 15 0	...		
	1839...	1	7	3 3 0	0 7 0	2 16 0	...		
	Total	2	73	9 5 0	3 13 0	5 12 0	...	5 12 0	
12. Logie Pert.	1835...	0	0	7 7 0	...	7 7 0	...		
	1836...	1	16	6 10 0	0 16 0	5 14 0	...		
	1837...	0	0	8 1 0	...	8 1 0	...		
	1838...	2	78	...	3 18 0	...	3 18 0		
	1839...	2	58	9 11 0	2 18 0	6 13 0	...		
	Total	5	152	31 9 0	7 12 0	27 15 0	3 18 0	23 17 0	
13. Marykirk.	1835...	8	150	4 4 0	7 10 0	...	3 6 0		
	1836...	0	0	5 0 0	...	5 0 0	...		
	1836...	2	64	...	3 4 0	...	3 4 0		
	1838...	1	37	4 10 0	1 17 0	2 13 0	...		
	1839...	5	353	8 2 1	17 13 0	...	9 10 11		
	Total	16	604	21 16 1	30 4 0	7 13 0	16 0 11	...	8 7 11
14. Menmuir.	1835...	0	0	...	...	...	...		
	1836...	0	0	3 0 0	...	3 0 0	...		
	1837...	0	0	...	...	...	...		
	1838...	2	44	...	2 4 0	...	2 4 0		
	1839...	0	0	...	...	...	...		
	Total	2	44	3 0 0	2 4 0	3 0 0	2 4 0	0 16 0	
15. St. Cyrus.	1835...	4	96	10 0 0	4 16 0	5 4 0	...		
	1836...	4	100	...	5 0 0	...	5 0 0		
	1837...	2	112	...	5 12 0	...	5 12 0		
	1838...	1	38	...	1 18 0	...	1 18 0		
	1839...	0	0	...	...	...	...		
	Total	11	346	10 0 0	17 6 0	5 4 0	12 10 0	...	7 6 0
Yearly Amnt.	1835...	34	933	67 2 6	46 13 0	34 1 6	13 12 0		
	1836...	23	857	57 13 2	42 17 0	36 4 3	21 8 1		
	1837...	20	983	53 17 8	49 3 0	32 19 8	28 10 0		
	1838...	26	1081	51 11 3	54 1 0	26 9 6	28 19 3		
	1839...	25	854	57 12 4	42 14 0	30 7 3	15 8 11		
	Total	128	4713	287 16 11	235 13 0	160 2 2	107 18 3	122 12 11	70 9 0
							Deduct total Loss.....	70 9 0	
							In favor of Charity....	£52 3 11	
Montrose.	1835...	54	1589	21 10 0	79 9 0	...	57 19 0		
	1836...	40	2972	29 0 5	148 12 0	...	119 11 7		
	1837...	75	2719	27 8 6	135 19 0	...	108 10 6		
	1838...	58	2127	29 4 6	106 7 0	...	77 2 6		
	1839...	48	1683	27 10 0	84 3 0	...	56 13 0		
	Total	275	11090	134 13 5	554 10 0	...	419 16 7	...	419 16 7
							Deduct the above.....		52 3 11
Grand Total.	1835...	88	2522	88 12 6	126 2 0	34 1 6	71 11 0		
	1836...	63	3829	86 13 7	191 9 0	36 4 3	140 19 8		
	1837...	95	3707	81 6 2	185 7 0	32 19 8	137 0 6		
	1838...	84	3208	80 15 9	160 3 0	26 9 6	106 1 9		
	1839...	73	2537	85 2 4	126 17 0	30 7 3	72 1 11		
	Total	403	15803	422 10 4	790 3 0	160 2 2	527 14 10	...	
							Loss on the whole....	£367 12 8	

N.B.—Great as this loss must seem, it has to be increased, because, in fact, and as stated by a Committee elsewhere referred to, the cost of each Patient was 1s. 1d. 1-5th *per diem*—that is, 1 1-5th more than the calculation assumes. Taking this also into account, then, we find, 1st, That 4713 times (the number of days) 1 1-5th, being £23 11s. 3d. 3-5ths, has to be *deducted* from £52 3s. 11d.—leaving only £28 12s. 7d. 2-5ths as the gain on 15 Parishes; 2d, That 11090 times (*ib.*) 1 1-5th, being £55 9s. 0d., has to be *added* to £419 16s. 7d.—making £475 5s. 7d. the loss on Montrose alone; and, 3d, That 15803 times (*ib.*) 1 1-5th, being £79 0s. 3d. 3-5ths (equal to £23 11s. 3 3-5ths × £55 9s. 0d.) has to be *added* to £367 12s. 8d.—making £446 12s. 11d. 3-5ths (equal to the difference between the gain, £28 12s. 7d. 2-5ths, and the loss, £475 5s. 7d.) as the *unfavorable balance on the whole.*

NUMBER OF DISPENSARY PATIENTS.

	1782	1783	1784	1785	1786	1787	1788	1789	1790	1791	1792	Total.
January	0	2	0	0	39	0	28	19	13	20	14	
February	0	0	0	0	27	14	19	44	36	26	16	
March	0	0	0	0	31	31	25	21	26	34	19	
April	0	24	0	33	23	16	11	14	22	42	12	
May	0	0	0	16	44	37	20	20	29	36	12	
June	0	0	0	30	20	20	18	35	23	22	0	
July	1	0	0	28	24	23	17	20	17	17	26	
August	1	0	0	31	34	23	16	36	44	23	18	
September	2	0	0	21	16	20	11	21	17	24	26	
October	0	0	0	4	0	7	28	12	22	16	15	
November	0	0	0	25	0	15	17	16	37	16	9	
December	0	0	0	17	20	18	16	17	0	13	26	
	4	26	0	205	278	224	226	275	286	289	193	

(Continued.)

	1793	1794	1795	1796	1797	1798	1799	1800	1801	1802	1803	
January	21	23	25	15	12	21	10	18	31	40	0	
February	0	28	17	26	23	26	20	33	33	52	0	
March	26	30	21	23	0	0	21	21	40	55	0	
April	35	27	40	39	32	29	18	33	35	41	0	
May	30	23	16	23	0	21	15	33	38	41	0	
June	21	13	49	43	32	26	30	31	41	0	0	
July	27	15	26	24	9	44	25	35	40	0	0	
August	43	19	21	14	11	0	21	28	35	0	0	
September	28	22	22	24	0	0	23	36	58	0	0	
October	35	30	30	30	16	13	25	39	49	0	0	
November	18	16	19	14	12	28	23	28	43	0	0	
December	27	36	31	21	0	20	23	30	36	0	0	
	311	282	317	296	147	228	254	365	479	229	0	4914

Years ending 30th June	1804	1805	1806	1807	1808	1809	1810		
	390	220	250	243	237	290	173	.....	1803

Years ending 31st May	1811	1812	1813	1814	1815	1816	1817	1818	1819	1820	
	240	233	196	298	380	490	565	971	860	662	

(Continued.)

	1821	1822	1823	1824	1825	1826	1827	1828	1829	1830	
	840	793	493	474	471	513	571	571	586	0	

(Continued.)

	1831	1832	1833	1834	1835	1836	1837	1838	1839	1840		
	793	944	491	489	638	773	1039	1081	576	418	...	17449

Allowing (moderately) for omissions during three *years* and many *months*, as above denoted—say 834

Total number..... 25000

Of this Total Number, which exceeds by 10,000 what was conjecturally estimated in the Sketch at page 8, fully *four-fifths*, or 20,000, may be reckoned as the proportional amount belonging to the Town and Parish of Montrose.

ASYLUM PATIENTS.

The printed Report of June 14, 1825, contains a "Statement of the number of Patients (Insane) who have been admitted into the Lunatic Asylum of Montrose, from the time it was opened, in 1782, to 1st June 1824, with the Result of the Cases, as abstracted from the Annual Reports and Records of the Institution." A modification of this, continued up to 31st May 1840, may be deemed appropriate.

Years.	Admitted.	Completely Recovered.	Apparently Recovered.	Removed.	Died.	Remained.
Up to 1824	412	129	37	13	144	56
1825	10	4	0	2	2	58
1826	9	4	5	0	3	55
1827	16	6	0	0	3	62
1828	13	9	0	0	3	63
1829	7	3	0	0	7	60
1830	19	4	0	2	8	65
1831	10	4	0	4	4	63
1832	15	5	0	3	2	68
1833	21	9	1	0	6	73
1834	14	11	0	1	10	65
1835	17	8	0	0	7	67
1836	24	12	2	1	13	63
1837	29	13	1	1	9	67
1838	40	23	3	1	6	76
1839	24	23	0	4	3	70
1840	26	14	0	3	9	70
	706	281	49	35	239	

While, considering the numerous differences in establishments of the kind, scarcely any thing can be more fallacious than "a comparative Table of Cures, collected from Reports of the various Asylums of the kingdom," unless it be made with due attention to qualifying circumstances, still every approximation to truth in this important particular is desirable. No apology, it is conceived, therefore, will be required for copying an attempt towards that effect from the Twenty-first Report of the Directors of the West Riding of York Pauper Lunatic Asylum—1840, p. 6. It is as follows—the numbers indicating *per centage:*

"From 1796 to 1836—York Retreat for the Society of Friends.....46.45
„ 1823 to 1833—Gloucester.....3 classes of Patients admitted..45.34
„ 1818 to 1838—Staffordshire.....3 do.....44.9
„ 1812 to 1838—Nottingham.....3 or 4 do.....43.43
„ 1820 to 1837—Lincoln.....3 do.....39.83
„ The opening to 1839—Lancaster, 3 do.....38.83
„ 1782 to 1839—Montrose.....39.26
„ 1827 to 1838—Perth.....Opulent Patients admitted.....34.68
„ 1814 to 1835—York.....4 classes of Patients.....31.5
To 1838 —Glasgow.....3 do.....27.53
From 1836 to 1839—Dundee.....3 do.....20.44
„ 1818 to 1839—Wakefield.....only Paupers.....43.92
„ Opening to 1838—Dorset..... do.....40.32
„ 1829 to 1838—Suffolk..... do.....38.26
„ 1836 to 1839—Edinburgh..... do.....25.0
„ 1831 to 1837—Hanwell..... do.....20.98
„ 1833 to 1837—Maidstone..... do.....20.69"

A foot note to this table remarks—"In the Dundee Asylum, which is decidedly one of the very best-conducted institutions in the kingdom, the highly respected and intelligent Superintendent states that in 1830 the cures were, for the ten preceding years, 42.8 per cent." In regard to Glasgow, again, the Twenty-sixth Annual Report (1840) states that, "Of the Patients dismissed in the course of the year, the cured amount to 44-368 per cent., the relieved

to 27.067, the deaths to 11.278." Adverting likewise to the same statement, Dr. Hutcheson (Superintendent at Glasgow) says—"In a table which he (Dr. Corsellis of Wakefield) has given of the per centage of cures in various Asylums, he rates those of this Institution so low as 27 per cent. The true per centage, for the last twenty-five years, has been upwards of 47; and I can account for his error only by supposing that, in looking over our Reports, he had mistaken a table containing only a part of the cures, for one containing the whole." (*Medical Gazette*, vol. 25, p. 960.) It is exceedingly probable that similar corrections might be made in regard to other establishments.

Since these remarks were written, there appeared the Tenth Annual Report of the Belfast District Asylum for Lunatic Poor. Besides a statement essentially identical with the preceding, though differently arranged, it contains a "Table showing the centesimal proportions of the total Discharges and Deaths in nine District Lunatic Asylums in Ireland, made up from their opening to 31st March 1839," which, for the reason and with the suggestion already mentioned, it may be well to quote.

	Recovered.	Relieved.	Mortality.	Period.
Armagh	44.91	29.90	13.75	1825 to 1829
Belfast	48.22	10.78	18.22	1829 to 1839
Carlow	45.53	3.50	9.75	1831 to 1839
Clonmel	37.96	10.20	11.43	1835 to ,,
Connaught	33.21	9.38	19.14	1833 to ,,
Limerick	51.57	7.41	14.09	1827 to ,,
Londonderry	45.21	10.73	20.53	1829 to ,,
Maryborough	41.19	3.69	12.23	1833 to ,,
Waterford	31.11	17.77	5.78	1835 to ,,

RESTRAINT—NON-RESTRAINT.

On this topic, now so much and so necessarily discussed, all accessible light should be thrown. The existing generation demands a full disclosure of facts regarding it, though the sound conclusions from them may be reserved for another. With the double view, then, of informing present inquirers, and, as far as possible, guiding their successors, the following pages are allotted to

I. Extracts from Manuscript Reports (formerly mentioned, as in possession of the Royal College of Physicians) relative to Public Asylums and Private Lunatic Establishments in and near Edinburgh.

II. Extracts from the Weekly Register of the Royal Lunatic Asylum of Montrose.

III. A Summary of Mr. Hill's Lecture, with its Appendix, on the System of Non-Restraint.

IV. Notices of various Documents bearing on the System of Non-Restraint.

I.

1819, *August.*—A*. 6 M., 18 F.—24. "She (Mrs. R.) shewed us the mark of an ankle-lock, and complained violently, but, in her present maniacal state, I believe restraint would occasionally be necessary, even though —— were better provided with keepers." "Captain S. was the only person under restraint."

—— B. 4 M., 3 F.—7. One, Mr. W., "was, I believe, very necessarily manacled. He was walking in the garden."

—— C. 4 M., 10 F.—14. Dd. M. "was in bed chained by a leg, which Mr. H. said was necessary."

—— D. 16 M., 5 F.—21. "In the upper day-room, we found Captain M. and Mr. F. manacled, because apt to strike."

1820, *January.*—E. 9 M., 2 F.—11. "Mr. G. was the only one under restraint, and it seemed necessary with him."

—— A. 4 M., 18 F.—22. "Mrs. R. (see above) was free from restraint when I saw her." "Captain S. (see above) was manacled, and the only one under restraint."

—— B. "Mr. S., the new boarder, has been very violent and unmanageable, but, though now quieter, was manacled."

—— D 13 M., 8 F.—21. "Miss T. still under restraint." "Miss M. still requiring restraint."

—— *April.*—E. "Mr. G., being considerably better, has been without restraint for a week."

—— A. 6 M., 18 F.—24. "Captain S. is always busy, and, although always manacled, writing seems to form a considerable part of his occupation."

—— F. 7 M., 7 F.—14. "Miss N. was in a strait waistcoat, which I believe necessary, as she was very restless and in great mental agitation." "J. C. (female) was under the same restraint."

—— B. 3 M., 4 F.—7. "C. S. is still said to be often very violent and noisy. He was in bed, chained to it by a leg." "J. E. was also in bed, free from restraint; but there is a chain also to his bed, which is occasionally fixed to one of his legs, to prevent him from doing mischief or injuring himself."

—— D. 11 M., 7 F.—18. "Mr. F. still in a high state, and requiring restraint, as well as Captain M." "Miss F., being considerably better, was without restraint."

* To avoid injurious exposures, which could not benefit the public or the cause at stake, capital letters, at the beginning of the entries, are employed to denote the Private Houses. Thus A. B., &c. down to T., always signify the same respectively; while the three Public Asylums are openly named. The two capitals M. and F., in conjunction with numbers—as 6 M. 18 F.—24—will at once be understood to indicate the Sexes. Capitals otherwise used have obvious references to the Patients, &c. The attentive reader will make his own remarks as to the proportional numbers of Patients under restraint throughout the establishments.

1820, *September.*—C. 2 M., 5 F.—7. "As he (Mr. E.) is said to be often very violent, he was chained to the floor by one of his legs."

—— H. 3 M., 4 F.—7. "C. S. was quiet and good-humoured, and walking about in the garden easily, though he had a chain on his legs, which I thought stronger and heavier than necessary. —— says that she cannot trust him without restraint, as he is apt to be suddenly violent."

—— D. 10 M., 6 F.—16. "Mr. W. talked to us most incoherently, and was in a strait waistcoat."

1821, *February.*—F. 8 M., 7 F.—15. "I found Mr. H. in a state of high delirium, and manacled, which I believe was necessary." "It is very painful to witness the misery of Miss N. —— says that her weeping and agitation are constant, that she is affected with diarrhœa, and tears her clothes. She was manacled, seated on a timber chair, and chained by one leg to the floor; and, though she was not far from the fire and the day mild, her legs and feet were very cold. It is probably not possible to render this unfortunate person comfortable; but with more care, attendance, and kindness, than she seems to have or can have here, some of the causes of her distress, at least in some measure, might be alleviated; and I said what I could to —— with this view. In the present state, I think she must soon be exhausted, and only wonder she has held out so long."

—— D. 12 M., 7 F.—19. "Mr. H. was lately brought from a house of confinement in London, and continues highly deranged, so as to require restraint." What does not appear.

—— F. 8 M., 8 F.—16. "Miss N. (see previous report) was in the kitchen, with a strait waistcoat, but in tolerable spirits, and altogether very considerably improved." Dr. S.'s hints, therefore, seem to have been effectual.

—— B. 2 M., 5 F.—7. "Mrs. H. is so troublesome that she is for the most part, both night and day, fixed with a leg-lock to the floor, from which perhaps she does not suffer much inconvenience; but such restraint would not probably be so constantly necessary in a house with more suitable accommodations and more attendants."

—— D. 11 M., 6 F.—17. "Messrs. &c. &c. (9 in all) were in the airing-ground—the three last manacled."

—— Lunatic Asylum. 9 M., 14 F.—23. "Miss H. is in a state of mania, and requires restraint." "Lieutenant W. and Mr. H. cannot be trusted without restraint."

1821, *August* and *September.*—E. 11 M., 4 F.—15. "No person at present here under restraint."

—— A. 8 M., 18 F.—26. "No person in this house, excepting Captain S. —was under restraint."

—— F. 6 M., 7 F.—13. "Mr. H. continues excessively deranged, and is very wild and noisy. It would appear that he is always chained at night by one leg to his bed, and frequently also by day in a corner of his room, both of which are probably very necessary, at least in a house such as this is."

—— D. 13 M., 8 F.—21. "Miss G. had on a strait waistcoat, because of her hurting herself with her nails."

1822, *February.*—A. 10 M., 19 F.—29. "A. H. is maniacal, and was under restraint, as she hurts herself and destroys her clothes." "Mr. H had a chain on his ankles, because he was said to have been using violence."

—— D. 13 M., 4 F.—17. "As Mr. S. destroys his clothes, he was under the restraint of a jacket."

—— *April.* A. 10 M., 20 F.—30. "Mr. H. was manacled, perhaps very necessarily."

—— B. 4 M., 5 F.—9. "Mr. R. was fixed by a chain to his bed."

—— *October.*—A. 11 M., 19 F.—30. "Mr. H. was confined to his room, with a light chain on his ankles, because he had been using his feet offensively." "Misses M., F., and H., are all at present maniacal, but none of them under restraint; and it appears to me that, in this house, restraint is as little employed as possible."

—— D. 10 M., 3 F.—13. "Mr. M. was manacled, as he is liable to sudden bursts of passion. Messrs. B. and M. were also manacled, all I believe very necessarily; and I think it a less irksome and inconvenient mode of restraint than the strait waistcoat." "Miss T. under restraint, both of arms and feet, as she is apt to use them violently against her neighbours."

1823, *January.*—F. 6 M., 7 F.—13. "C. L. has lately had several epileptic fits, and I found her highly maniacal and in a strait waistcoat."

—— D. 10 M., 3 F.—13. "Messrs. &c. &c. were in the lower day-room, &c. The other five gentlemen were in the upper day-room, all manacled, because they were apt to strike, except Mr. W., who is in a very lost, stupid state," &c.

—— *May.*—A. 11 M., 17 F.—28. "Mr. C. was walking in the court, very frequently uttering a strange sound. His hands were manacled behind his back, because he hurts himself, and is apt to attack other people violently, and, though he has much appearance of fatuity, he answers questions correctly."

—— I. "He (one of two men) was leg-locked, because he attempted to escape—is sometimes violent, and is a strong man."

—— D. 10 M., 3 F.—13. "We found eight of the gentlemen in the airing-ground, and four manacled, as last reported."

—— E. 8 M., 3 F.—11. "—— informed us that Mr. H. had been so troublesome as to require restraint for a short time."

—— D. 10 M., 4 F.—14. "All the gentlemen were together in their airing grounds, five of them, I believe, very necessarily, under restraint. Mr. S. was in a strait waistcoat, with his arms crossed and secured. Manacles alone, in his present furious state, would be insufficient. Mr. W. was loosely manacled and leg-locked, because of late he has been apt both to strike and kick."

1824, *February.*—D. 12 M., 4 F.—16. "Both his (Mr. R.'s) hands and feet were under restraint, as he is apt to strike with both."

—— *April.*—K. "Miss O., &c. We found her quite maniacal, and very necessarily under the restraint of a strait waistcoat, and confined to bed."

—— D. 12 M., 3 F.—15. "Messrs., &c. (four in all) were manacled, as they are apt to strike."

—— *November.*—D. 14 M., 6 F.—20. "As he (Mr. W., a new Boarder) had at first been very obstreperous, I found him with his arms and hands confined; but, from his manner and conversation, it did not appear probable that any kind of bodily restraint would be long necessary." *But see after.*

1825, *February.*—L. 1 F. "Miss F. is again in a state of high excitement, and, as her brother has forbidden all kind of personal restraint, it is surprising that she has not been burnt severely, as she usually sits quite close to the fire."

—— I. 2 M., 5 F.—7. "R. J.'s ankles were chained, as he has been disposed to be violent."

—— B. 2 M., 4 F.—6. "Mrs. M. has been very violent, and is evidently in a state of high excitement, rendering personal restraint necessary, as she breaks and tears every thing. She is said to have been in this way for several months, and to have been delivered of a child a month ago."

—— C. 8 as before. "For some time past, Miss H. has been so noisy and violent as to make it necessary to remove her to a room distant from the rest of the family, and at times to put her under personal restraint."

1825, *April.*—I. 4 M., 4 F.—8. "—— said that he (S.) was extremely troublesome and mischievous, on which account he was leg-locked."

—— M. 6 M., 3 F.—9. "A. was in the garden and leg-locked, because he had attempted to make his escape." "D. was in bed, with his legs chained to it, in an outhouse, which was spacious, light, and clean. A.'s bed was also in it, and at this season a much preferable place to some of the dark, airless rooms in the house."

—— *September.*—M. 9 M., 3 F.—12. "—— has removed to a situation much preferable to her former—the house standing by itself in a field—so that her people can now be very much out of doors; but, as there are hardly any fences, most of the men were leg-locked. I consider this, however, much better for them than almost constant confinement in a small, ill-aired house in the heart of ——."

1826, *February.*—D. 17 M., 4 F.—21. "As he (a new Patient) is apt to be very violent and mischievous, was under restraint." "Miss H. was under restraint, because she has been apt to hurt herself."

—— *May* and *June.*—M. 10 M., 4 F.—14. "C. has twice made his escape, and gone to a considerable distance, though leg-locked."

1826. B. 2 M., 4 F.—6. "Mr. R. continues very violent. He had just had the cold bath, which almost always renders him calmer for a while."

—— D. 16 M., 6 F.—22. "Messrs. &c. &c. (5) were in the upper day-room, all except Mr. B. very necessarily manacled." "Miss T. is again in a state of such high excitement as to require restraint."

—— *October*.—N. 10 M., 5 F.—15. "Mr. C. is so unmanageable as to require restraint."

—— O. 2 F. "Mrs. L. was walking about the garden, in a strait waistcoat."

—— F. 12 M., 6 F.—18. "There was no person here under restraint."

—— P. 8 M., 5 F.—13. "Mr. D. was in bed, with an ankle chained." "N. was walking about the park, with his ankles chained, as there is no enclosure."

—— M. "C. again made his escape, and was brought back from Greenock." Leg-locking, it seems, therefore, was quite insufficient without enclosure. But why allow the latter to be wanting?

—— D. 15 M., 8 F.—23. "Miss H. was under restraint." "The six others (males) were in the upper day-room, four of them under restraint."

1827, *January*.—M. 7 M., 5 F.—12. "Miss D. was confined in her bed by a chain to her ankle, of which she complained very much, and not without cause; but some kind of restraint I believe to be necessary in her case."

—— D. 14 M., 4 F.—18. "Miss M. (a new Patient) is necessarily under restraint." "There were five gentlemen in the upper day-room, three of whom had their hands secured."

—— *April*.—P. 6 M., 5 F.—11. The following entry implies more than is expressed:—"R. D. lately relapsed into the maniacal state, and has destroyed all his bed-clothes, and, though said to be now less violent, he appears still to be in high excitement. Mr. D. continues exceedingly noisy and unmanageable. In a proper establishment, such persons would be restrained in a manner much less uneasy to the unfortunate maniacs; but allowance must be made for the small board paid here."

—— E. 8 M., 3 F.—11. "As —— had strong reason (certain things being detailed) to think that he (Mr. G.) was meditating mischief, &c., he had judged it necessary to put Mr. G. under personal restraint, and to have him very closely watched." "Mr. P. very much deranged, and in a strait waistcoat."

—— I. 4 M., 6 F.—10. "D. B. had had a fit of insensibility in the morning, and we found him in a state of excitement, with a chain on his ankles. We had hardly left the room where he was when he was seized with a fit of phrenzy, the violence of which it was very difficult to restrain."

—— D. 16 M., 4 F.—20. No particular mention of restraint; but it is said, "Dr. —— now resides here and superintends the establishment, which must be considered as a great advantage to it."—Mem.—I notice this with reference to any discoverable change as to restraint, which, it is certain, had been much practised at D.

—— *August* and *September*.—A. 10 M., 18 F.—28. "Both his (Mr. T.'s) wrists and ankles were secured, as —— is still afraid of his committing suicide."

—— E. 8 M., 3 F.—11. "Mr. G. complained of his being put under personal restraint during night."

—— Q. 1 M., 8 F.—9. "Her hands (a new Patient) were confined in a muff, as she tears her clothes."—Mem.—This is the first notice of the muff.

—— D. 16 M., 4 F.—20. No mention of restraint. Some of the gentlemen said to be in the garden, "where they exercise and amuse themselves with working."

Mem.—The next Report—namely, of January and February 1828—makes no mention of restraint throughout.

1828. *April*.—F. 13 M., 8 F.—21. "Bell W. is noisy and mischievous, having broken all the glass of the windows, and was under restraint, which she evidently requires."

—— D. 16 M., 3 F.—19. "He (a Patient from Lunatic Asylum) was under restraint in the upper day-room, with Messrs. &c. (5), all likewise with their hands restrained, and Mr. B. without restraint. It has lately become necessary to secure Mr. A.'s hands, as he has been attempting suicide."

—— B. 5 M., 3 F.—8. "Both (new Patients) in a state of high excitement,

and requiring restraint." "Mr. A. was manacled, and one of his legs also secured, as, during the preceding night, he had become very violent and noisy, and, in fighting with phantoms, had hurt one of his fingers. He complained of his confinement and restraint, and said that he was not insane, but only his mind irritated by such treatment. In the course of his conversation, however, he fully manifested insanity," &c.

1828. *September* and *October*.—P. 8 M., 5 F.—13. "They (the Patients generally) have the advantage of a very large field for air and exercise; but, as it is not securely fenced, those of them who would escape could not enjoy either without an ankle chain or some such means of restraint and prevention."

—— E. 8 M., 6 F.—14. "This propensity (to suicide) continues so strong, that it is necessary to keep —— under constant restraint."

—— D. 16 M., 2 F.—18. "He (Mr. S.) was in the upper day-room with Mr. B., both without restraint; but Messrs. &c. &c. (4 or 5?) and Mr. G., their companions, had all their hands secured to prevent their injuring themselves or others; and this has been for a long time almost constantly necessary with these gentlemen."——Mem.—It seems, therefore, that the old plan continues. "Miss T. is free from restraint, but is still much deranged."

—— Lunatic Asylum. 13 M., 18 F.—31. "There were five males and one female under restraint, who, with the exception of one gentleman—a more recent case—have almost constantly required it to prevent their doing injury to themselves or others."——Mem.—The same plan seems, therefore, to have been perseveringly adopted at Morningside. Though Bedlam and St. Cuthbert's are specially mentioned in this report, restraint is not spoken of as being used in them.

1829, *January*.—C. "I have never seen any of the four ladies here restrained."

—— P. 7 M., 5 F.—12. —— has again made his escape to Perth, and —— refused to take him back again."

—— E. 8 M., 6 F.—14. "She (Mrs. H.) was without restraint, but it is for the most part requisite, as well as constant watchfulness, as she has still the same desire to injure or destroy herself, chiefly by swallowing substances for that purpose. She is the only one under personal restraint here."

—— I. 6 M., 7 F.—13. "I observed no person under restraint."

—— B. 4 M., 4 F.—8. "Since last Report, Mr. S. has had many epileptic fits, and at times been so violent as to require restraint." "No person was under restraint."

—— D. 15 M., 3 F.—18. "Mr. A. having made several attempts to injure himself, is now for the most part under restraint; and in the upper day-room, Messrs. M., F., L., and W., are also necessarily under restraint."

—— Lunatic Asylum. 13 M., 18 F.—31. "Mr. W. continues so vicious as to require complete restraint, and three men to assist at his dressing and undressing."

—— *April*.—S. "—— has very recently got a new Boarder, as —— had not room for him. He was in the garden with an ankle chain."

—— B. 4 M., 4 F.—8. "Miss R. and F. were under restraint—in both quite necessary."

—— D. 14 M., 2 F.—16. "Messrs. M., L., F., and W., require constant restraint, and Miss A. and D. occasionally."

—— *September* and *November*.—S. 2 M., 1 F.—3. "J. V. was sitting in the garden reading, with ankle shackles and a strait waistcoat, because he is sometimes very violent, and the garden is not sufficiently fenced to prevent escape. P. C. has also an ankle chain for the same reason."

—— E. 8 M., 6 F.—14. "Mr. N. G. was re-admitted in June, —— says, as cunning, malicious, and difficult to manage as before—so that restraint has, for the most part, been requisite. He is of gigantic stature, and a very powerful man."

—— I. 8 M., 8 F.—16. "D. J. requires restraint."

—— C. 1 M., 4 F.—5. "Margt. L. sometimes requires restraint."

—— Lunatic Asylum. 16 M., 19 F.—35. "—— (a new case) requires almost constant and complete restraint."

—— Edinburgh Bedlam. 31 M., 36 F.—67. After mentioning the general state, in favorable terms, it is said—"Along with warm bath, there is the *douche*, which has frequently a powerful effect in allaying high excitement."——Mem.—

This is the first notice of the *douche*, and the introduction of that mode of subduing, &c., was highly creditable to the institution.

Warm, cold, and shower-baths, are spoken of as having been erected, &c., at St. Cuthbert's.

No mention of restraint in these two establishments at this period.

1829. D. 16 M., 4 F.—20. "Mrs. &c. (a new Patient) is at present in a state of increased excitement, being incoherent and violent, and incessantly spitting. She is in her own apartment, fastened in a chair by straps." "Mr. A. D. (another new Patient, who had attempted suicide by holding in his breath) is now under restraint." "Messrs. M., F., W., A., and L., are under restraint in the airing-ground."

1830, *January*.—F. 13 M., 7 F.—20. "Dav. G. (a new Patient) has been at times so unruly as to require restraint." "Ch. L. was the only one whom I observed under restraint, and in her state it seemed very requisite."

—— C. 1 M., 4 F.—5. "Margt. L. is subject to restraint only during night, to prevent her from tearing the bed-clothes."

—— *February*.—D. 15 M., 4 F.—19. "The following gentlemen were in the upper day-room:—Messrs. M., A., W., D., L., S., and F., all of them in a greater or less degree of personal restraint, by means of manacles or the strait waistcoat." "Mr. E. was in a state of much excitement, and still requiring to be fixed in the chair, as at the last inspection."

—— *April*.—S. 3 M., 1 F.—4. "All three (males) had on ankle chains."

—— F. 14 M., 8 F.—22. "C. L. (female) was the only one under personal restraint."

—— E. 9 M., 5 F.—14. "There were none under restraint, but Mrs. C. and Mrs. G. are so during night."

—— A. 6 M., 20 F.—26. "Mr. H. had on ankle chains, and was the only one under personal restraint."

—— I. 7 M., 6 F.—13. "J. R. (a new male Patient) was manacled."

—— D. 15 M., 4 F.—19. "There were in the upper day-room Messrs. M., F., S., W., A., L., D—m, and D—d, all more or less under personal restraint, except Mr. B. and D.; but Mr. D. is in general so during night. Mr. D—d requires constant restraint, as he has several times attempted to strangle himself."

—— B. 2 M., 2 F.—4. "None of them were under personal restraint."

—— C. 5 as before. "Mrs. L. is at times under personal restraint."

—— Edinburgh Bedlam. 32 M., 38 F.—70. "Only 4 confined to their cells, and not one of them under personal restraint." Dr. S. particularly notices the case of Geo. G., "who, after having been six months in the Lunatic Asylum, was brought here in the beginning of January in a very bad state, and requiring personal restraint. In about five weeks he suddenly took a favorable change, and about the middle of last month he went out well." Here I may remark, that, in the Report for September, November, 1829, the same person's case is mentioned as very unpromising, and requiring "almost constant and complete restraint."

—— St. Cuthbert's. 12 M., 29 F.—41. "Only one person, a woman, under personal restraint, and that only since the morning."

—— *October*.—S. 5. M., 2 F.—7. "4 men were in the garden, with leg-irons, as the garden is not properly fenced."

—— A. 6 M., 20 F.—26. "Mr. H. had leg-irons, but was the only person here under personal restraint, as he cannot be trusted without it."

—— D. 13 M., 4 F.—17. "Mr. D. (brought from Lunatic Asylum) was under personal restraint for fear of his injuring himself, in the upper day-room, with Messrs. B., J., F., L., M., W., and A., all under personal restraint excepting the two first." "Mrs. E. is so bad as to require constant restraint."

1831, *January* and *February*.—R. 3 F. "Mrs. A. W. M. is said to have been ill for several years—at first, when here, requiring restraint, but now not necessary, as she has become much calmer."

—— D. 13 M., 3 F.—16. "Mrs. E. again under high excitement, and very necessarily under restraint." "Mr. D. has now only a slight degree of restraint during night." "Mr. D—d had on a muff, as a large nail was lately found concealed about him."

1831. *April.*—I. 14 M., 8 F.—22. "Jane W. almost constantly requires restraint."

—— D. 13 M., 5 F.—18. "Miss H. was quiet and with a seam in her hand; but is said to be often so very violent, and so difficult of control, that she cannot yet be trusted without almost constant restraint."

—— *September* and *November.*—S. At page 10, it is said—'The Sheriff received a letter from Surgeons who had been visiting Wm. M. (at S.), stating various complaints as to this house—that some of the people have ankle chains—that the garden had not proper walls, and was not sufficiently fenced, &c. &c. (so marked). But Mr. Duff in a conference with ——, satisfied them that, at the rate of board here (£20 for 5—£16 for the other 50), much was not to be expected; and as the garden is imperfectly fenced, it is preferable for the people to enjoy the open air, and what exercise they can take with an ankle chain, than to be constantly confined to the house." I make no comment at present on the above opinion, which, probably, was well known among those who had such incomplete establishments, and seems to have operated for a very long period!

—— E. 9 M., 4 F.—13. "Mr. ——, surgeon, who attends the house, and Mr. —— do not think him (Mr. G.) altogether sane, and cannot trust him without personal restraint during night."

—— I. 16 M., 9 F.—25. "Jas. L. is still so high as for the most part to require personal restraint."

1832, *January* and *March.*—D. 13 M., 4 F.—17. Mrs. E. and Miss T. were quiet and not under restraint."

—— Edinburgh Bedlam. 32 M., 38 F.—70. "There was no person under personal restraint."

—— F. 14 M., 8 F.—22. "Jas. L. still frequently requires personal restraint."

—— A. 6 M., 18 F.—24. "Mr. G. had on a muff to prevent him from tearing his clothes, and was the only one under personal restraint."

—— *April.*—D. 13 M., 4 F.—17. Though not specially mentioned for some time, I suspect, from the following passage, that the old plan still continued here:—"There were only 4 gentlemen in the lower day-room, Messrs., &c. The other 8 were in the upper day-room, and Mr. S. among them, *as* he has of late been worse and disposed to strike."

—— A. 6 M., 18 F.—24. "Messrs. H. and G. were under personal restraint; and Miss J. is so occasionally, and it seems necessary for them all."

—— *August.*—S. 7 M., 8 F.—15. "H. K. (a new case) is still in such a state as to require restraint."

—— F. 15 M., 10 F.—25. "Mr. B. has lately been worse, and at times has required restraint."

—— I. 17 M., 11 F.—28. "J. L. still occasionally requires restraint."

—— A. 5 M., 19 F.—24. "Mr. H. had an ankle chain, as he is very apt to be violent. Mr. G. generally requires restraint to prevent him tearing his clothes; and Miss J., to keep her from doing mischief."

—— D. 14 M., 3 F.—17. (Separate Report by Dr. Davidson.) "Mr. N. T. was admitted, &c., in a state of high excitement—requiring restraint for some time after his entering the house." "Mr. F. requires handcuffs almost constantly, from his tendency to strike and to destroy his clothes."

1833, *January.*—Mem.—No mention of restraint throughout; but, in the separate Report by Dr. Davidson, it is said—

—— D. 12 M., 3 F.—15. "Three, Messrs., &c. &c. &c., are occasionally under restraint; but they were all unmanacled, when I paid my visit." "The 3 females are, &c. None of them under restraint."

—— *April.*—N. 10 M., 8 F.—18. "No person here under restraint."

—— S. 7 M., 9 F.—16. "He (J. P.), C., G., K., and A., had ankle chains to prevent their escape from the garden."

—— I. 23 M., 9 F.—32. "None were under bodily restraint."

—— E. 12 M., 2 F.—14. "Mr. M. is so mischievously disposed, that he requires constant attention, and personal restraint."

—— D. (Dr. Davidson's Report.) 14 M., 3 F.—17. "Of the male Patients, three were in occasional restraint. Mr. W., though he has become more tranquil lately. Mr. S., who requires manacles always during the night, from quitting bed, tearing the clothes, breaking the windows, and other irregu-

larities. Captain M. is frequently restrained, on account of his propensity to strike and kick the other patients."

1833. *September.*—(Dr. Davidson's Report.) D. 12 M., 2 F.—14. "Mr. F. has been under restraint for fourteen days, on account of violence to the attendants, and to prevent him from stripping and running about in a state of nudity." "Mr. F. is also occasionally under restraint during the day, and always in the night time; as are also, Mr. W., and Mr. M."

—— *August* and *September.*—N. 10 M., 11 F.—21. "Miss W. has required restraint; but, though we saw her without it, she was still in very high excitement. There was no person under personal restraint."

—— I. 22 M., 9 F.—31. "J. T. (a new Patient), requiring restraint."

—— B. 3 M., 3 F.—6. "Mrs. H. continues most unhappy, and keen to escape, to prevent which personal restraint is here necessary: Her ankle was secured to the bed, the chain of considerable length, but not so long as to allow her reaching the window—an easier mode than most others: it would be better, however, if she were where less restraint would be required; but she would be very impatient of confinement wherever she was."

1834, *February.*—E. 10 M., 2 F.—12. "—— had previously informed me that he (Mr. G., an old case) had become so mischievous and wicked, and that he was so cunning and strong, that he had been obliged to put him under personal restraint, and even, for a time, to chain him to the middle of the room, to prevent his destroying every thing within his reach; and that he had been endeavouring, not without success, to incite others to discontent and resistance. I found Mr. G. free from personal restraint, but much enraged and agitated; and he accused —— of wanton tyranny, &c. I do not think —— would have resorted to such strong measures if they had not been necessary."

—— *March* and *April.*—P. 7 M., 7 F.—14. "It had been necessary to put Mrs. D. under personal restraint a few hours before our visit."

—— *October.*—E. 11 M., 3 F.—14. "Mr. G. (see before) has for some time been free of personal restraint, except during night, but has been kept separate from the rest, because —— says he is most artful, and excites the others to discontent and mutiny."

—— D. 12 M., 3 F.—15. "She (a new Patient) continues in a highly deranged state, requiring personal restraint." "His (Captain H.) hands were secured in a muff, to prevent him tearing his clothes or doing injury to others."

1835, *February.*—D. 13 M., 4 F.—17. "Captain H. is considerably better, and has been so moderate and quiet for several weeks as to be entirely without restraint."

—— S. 7 M., 9 F.—16. "Thirteen of those here are paupers, and five of the men wear fetters, on account of the incomplete fencing of the garden."

—— E. 9 M., 3 F.—12. "Mr. G. has been behaving much better, has been free from restraint also during the night for some time, and made no complaint to me."

—— *April.* No mention of restraint throughout.

—— *September.*—D. 13 M., 3 F.—16. "All the gentlemen were in the airing-ground, and all free from personal restraint, except Mr. F., whose hands were in a muff." "Several of the others occasionally require restraint, as Mr. M. still during night, though he is considerably improved, and Mr. W. to prevent him from tearing his clothes." "Mrs. C. also has occasionally required personal restraint."

—— T. 1 M., 5 F.—6. "Mrs. C. C. (a new case) is still in high excitement, in constant motion, and requiring personal restraint."

—— P. 7 M., 9 F.—16. "J. G. has of late been so violent as to require personal restraint."

—— S. 8 M., 9 F.—17. "G. S. (a new case) is so very noisy and unmanageable as to require personal restraint."

—— E. 12 M., 3 F.—15. "P. P. lately knocked down one of the keepers with a billiard cue which he had concealed, and continues in such a mood that personal restraint is necessary."

—— A. 7 M., 18 F.—25. "Mr. S.'s (an assistant or surgeon) opinion of him (Lieutenant W.) is, that it is as necessary as ever to keep him under restraint, to keep him from doing injury to himself or others.

1385. I. 27 M., 17 F.—44. "J. B. was manacled, being much deranged and troublesome."

1836, *February.*—P. 8 M., 9 F.—17. "Mr. J. B. (a new case) knew me at once, and spoke to me in great good humour, and said he was quite well and comfortable, though under complete personal restraint."

—— E. 12 M., 3 F.—15. "P. P. continues so much disposed to be violent that it is necessary to confine his hands."

—— *April.*—D. 13 M., 4 F.—17. "He (Mr. C., an interesting case) was still necessarily under complete restraint in a chair, and in a large pleasant room."

—— A. 6 M., 19 F.—25. "Mr. V. was in the garden with manacles on, and tried to conceal them with a newspaper. They had been put on because he is so apt to be passionate and violent."

—— *October.*—N. 14 M., 11 F.—25. Notice of an instructive case—namely, of a young female who, unknown to —— had attempted suicide before reception. "She contrived to get out at a very narrow opening at the top of her window, and her head was so injured that she died four days after."

—— P. 8 M., 9 F.—17. "P. having lately destroyed his clothes, was in bed with fetters, of which he complained as hurting his legs; but they were quite loose, and above his stockings." "As the garden here is not sufficiently fenced, all those who go out to it have fetters—certainly a great evil and grievance, but preferable to constant confinement in the house."

1837, *February.*—D. 14 M., 5 F.—19. "Mr. M. was very insane, in high excitement, requiring personal restraint."

—— I. 27 M., 25 F.—52. "G. G. still requires personal restraint, as he destroys everything he possibly can."

—— *April.*—I. 27 M., 24 F.—51. "J. B. continues very wicked and outrageous, and requiring personal restraint."

The value of these extracts, disclosing as they do what the community have a right to know, can hardly be overrated. They state facts on the best possible authority—that of gentlemen—official personages—distinguished alike by professional eminence, experience, opportunities for observing, humanity, and all the qualities which can give weight to testimony. And to what does their testimony amount? Certainly to some such inferences as the following:—that the Public Asylums had a smaller proportion of Patients under restraint than the Private Establishments; that the largest of the former is entitled to the credit of a similar remark as compared with the smallest; that, throughout the whole of these establishments, however varied as to rates of board, or other circumstances, the necessity for restraint seems to have been admitted and acted on without hesitation when Patients became very noisy, troublesome, violent, or dangerous; that, aside from the ordinary reasons for employing it, the defective condition of some of these establishments, as to keepers and fences, had a like tendency to induce restraint; that, during the entire period, there existed a readiness both to advance and to sanction such reasons for imposing it; and that, though the actual practice of it seems to have rather abated towards the end of the period, the idea of adopting any substitute for it was never entertained, or, at all events, carried into effect. Now, in the absence of information to the contrary, and assuming that the institutions themselves laboured under no disadvantages of a special character, except such as are mentioned, it may be affirmed that the system of restraint—modified, doubtless, in a variety of ways, both as to kind and degree—was universally recognized and adopted, till the formal abolition of it in the case of the Lincoln Asylum. If, then, there be safety and advantage from the opposite—a point, of course, amenable to evidence—the merit of suggesting and enforcing such a change rests with that institution. We have already seen some objections to the views of Mr. Hill, and more will be brought forward—the importance of the subject demanding every possible attention. But, meanwhile, for the double purpose of confirming one of the above positions, and setting an example due to the interests of truth, moral as well as scientific, the following Table will shew to what extent the system of restraint was practised at Montrose, during a period of about ten years.

II.

EXTRACTS FROM THE WEEKLY REGISTER OF THE MONTROSE LUNATIC ASYLUM, SHOWING THE PROPORTION OF PATIENTS UNDER RESTRAINT AT DIFFERENT PERIODS.*

Date.	Males.		Females.		Restrained.		Total Patients.
	Curab.	Incurable.	Curab.	Incurable.	Males.	Females.	
1828. Aug. 23.	2	32...34	3	25...28	3	3...6	62
Sept. 20.	2	32...34	4	25...29	3	3...6	63
Oct. 25.	3	32...35	4	25...29	3	3...6	64
Nov. 22.	3	31...34	4	24...28	3	3...6	62
Dec. 20.	3	31...34	4	23...27	3	3...6	61
1829. Jan. 24.	2	31...33	5	23...28	3	3...6	61
Feb. 21.	3	31...34	5	23...28	3	3...6	62
Mar. 21.	3	30...33	5	23...28	3	3...6	61
Apr. 25.	4	29...33	5	23...28	4	3...7	61
May 23.	4	29...33	5	25...30	4	3...7	63
June 20.	3	29...32	3	25...28	4	3...7	60
July 25.	4	29...33	4	25...29	4	3...7	62
Aug. 22.	4	28...32	4	25...29	4	3...7	61
Sept. 19.	2	30...32	2	28...30	4	3...7	62
Oct. 24.	1	31...32	2	28...30	4	3...7	62
Nov. 21.	2	31...33	1	28...29	4	3...7	62
Dec. 26.	5	32...37	2	27...29	4	3...7	66
1830. Jan. 23.	6	31...37	2	26...28	4	2 ..6	65
Feb. 20.	4	29...33	2	26...28	3	2...5	61
Mar. 20.	3	29...32	4	26...30	3	2...5	62
Apr. 17.	4	28...32	5	25...30	5	2...7	62
May 15.	5	28...33	6	25...31	6	2...8	64
June 19.	4	28...32	7	26...33	4	2...6	65
July 24.	5	28...33	7	26...33	5	2...7	66
Aug. 21.	7	28...35	7	26...33	5	2...7	68
Sept. 25.	7	28...35	7	26...33	5	2...7	68
Oct. 23.	5	30...35	6	28...34	5	2...7	69
Nov. 20.	4	31...35	4	30...34	5	2...7	69
Dec. 18.	4	31...35	4	29...33	4	2...6	68
1831. Jan. 22.	2	32...34	4	29...33	4	3...7	67
Feb. 19.	2	32...34	3	29...32	4	3...7	66
Mar. 19.	2	31...33	3	30...33	4	3...7	66
Apr. 23.	1	31...32	3	30...33	4	3...7	65
May 21.	1	31...32	2	30...32	4	3...7	64
June 18.	4	31...35	3	30...33	4	3...7	68
July 23.	4	31...35	3	31...34	4	3...7	69
Aug. 27.	4	31...35	3	31...34	4	3...7	69
Sept. 17.	4	30...34	3	31...34	4	3...7	68
Oct. 22.	4	30...34	2	31...33	4	3...7	67
Nov. 26.	2	30...32	4	30...34	3	2...5	66
Dec. 31.	1	30...31	3	30...33	3	3...6	64
1832. Jan. 21.	3	30...33	3	30...33	3	3...6	66
Feb. 25.	3	30...33	3	30...33	3	3...6	66
Mar. 17.	4	30...34	3	30...33	3	3...6	67
Apr. 21.	4	30...34	3	30...33	2	2...4	67
May 26.	5	30...35	4	30...34	2	2...4	69
June 16.	3	30...33	4	30...34	2	2...4	67
July 21.	4	30...34	5	31...36	2	2...4	70
Aug. 18.	6	30...36	7	31...38	2	2...4	74
Sept. 22.	6	31...37	6	32...38	2	2...4	75
Oct. 20.	5	30...35	6	32...38	2	2...4	73

* These extracts are taken almost indiscriminately from a much larger Table—the entries therein being at least four per month in place of one. The reader will please to understand, accordingly, that the numbers under restraint, though mentioned only once in each month of the year, continued with but slight modifications throughout. Great as the amount may seem to have been occasionally, it was small in comparison with the proportions exhibited in some of the Private Houses above noticed.

Date.	Males.		Females.		Restrained.		Total Patients.
	Curab.	Incurable.	Curab.	Incurable.	Males.	Females.	
1832. Nov. 17.	4	32...36	4	31...35	2	2...4	71
Dec. 22.	4	32...36	4	31...35	2	2...4	71
1833. Jan. 19.	8	32...40	5	31...36	2	2...4	76
Feb. 16.	8	31...39	5	31...36	2	2...4	75
Mar. 23.	5	31...36	4	31...35	2	2...4	71
Apr. 20.	5	31...36	4	31...35	2	2...4	71
May 18.	5	31...36	6	31...37	3	2...5	73
June 29.	5	30...35	7	31...38	3	2...5	73
July 29.	4	29...34	6	31...37	3	2...5	71
Aug. 17.	3	30...33	5	30...35	3	2...5	68
Sept. 21.	2	29...31	6	30...36	3	2...5	67
Oct. 19.	3	29...32	6	30...36	3	2...5	68
Nov. 23.	3	27...30	9	30...39	1	2...3	69
Dec. 21.	2	28...30	5	33...38	2	3...5	68
1834. Jan. 25.	2	28...30	6	33...39	3	2...5	69
Feb. 22.	3	28...31	7	33...40	3	2...5	71
Mar. 15.	3	29...32	5	33...38	3	2...5	70
Apr. 26.	2	30...32	2	33...35	2	2...4	67
May 24.	2	30...32	3	32...35	2	2...4	67
June 14.	2	30...32	1	32...33	2	2...4	65
*July 5.	2	30...32	1	32...33	3	3...6	65
Aug. 23.	3	30...33	1	31...32	2	2...4	65
Sept. 20.	3	30...33	3	31...34	3	2...5	67
Oct. 18.	3	30...33	3	31...34	3	2...5	67
Nov. 22.	3	30...33	3	30...33	3	2...5	66
Dec. 20.	4	30...34	5	30...35	3	2...5	69
1835. Jan. 31.	4	30...34	5	29...34	2	2...4	68
Feb. 28.	3	30...33	6	28...34	2	2...4	67
Mar. 21.	3	29...32	5	28...33	2	2...4	65
Apr. 25.	3	29...32	6	29...35	2	2...4	67
May 23.	4	28...32	7	29...36	2	2...4	68
June 20.	5	29...34	6	28...34	2	2...4	68
July 18.	5	29...34	6	28...34	2	2...4	68
Aug. 22.	6	29...35	8	29...37	1	1...2	72
Sept. 12.	7	28...35	9	29...38	1	1...2	73
Oct. 17.	8	28...36	8	29...37	1	1...2	73
Nov. 28.	9	27...36	6	29...35	1	1...2	71
Dec. 19.	11	27...38	8	27...35	1	1...2	73
1836. Jan. 16.	8	27...35	7	27...34	1	1...2	69
Feb. 20.	8	25...33	6	26...32	1	1...2	65
Mar. 19.	8	25...33	6	26...32	1	1...2	65
Apr. 16.	8	25...33	6	26...32	1	1...2	65
May 21.	8	25...33	7	25...32	1	1...2	65
June 18.	8	25...33	6	26...32	1	1...2	65
July 16.	7	27...34	6	26...32	1	1...2	66
Aug. 20.	8	27...35	5	27...32	1	1...2	67
Sept. 24.	9	27...36	4	26...30	1	1...2	66
Oct. 22.	10	28...38	5	26...31	1	1...2	69
Nov. 26.	9	28...37	7	26...33	1	1...2	70
Dec. 17.	10	28...38	7	26...33	1	1...2	71
1837. Jan. 21.	11	28...39	7	26...33	1	1...2	72
Feb. 25.	10	28...38	6	26...32	1	1...2	70
Mar. 18.	8	28...36	4	25...29	1	1...2	65
Apr. 22.	8	28...36	5	25...30	1	1...2	66
May 27.	8	29...37	5	25...30	1	1...2	67
June 24.	5	29...34	5	30...35	1	1...2	69
July 22.	7	29...36	6	30...36	1	1...2	72
Aug. 19.	6	29...35	6	30...36	1	1...2	71
Sept. 23.	7	29 ..36	5	30...35	1	1...2	71
Oct. 23.	8	29...37	6	30...36	1	1...2	73
Nov. 18.	8	29...37	7	30...37	1	1...2	74

* This is the first entry under Dr. Browne's signature.

Date.	Males.		Females.		Restrained.		Total Patients.
	Curab.	Incurable.	Curab.	Incurable.	Males.	Females.	
1837. Dec. 30.	8	28...36	10	30...40	1	1...2	76
1838. Jan. 27.	7	28...35	11	30...41	1	1...2	76
Feb. 17.	8	28...36	11	30...41	1	1...2	77
Mar. 31.	8	28...36	10	30...40	1	1...2	76
Apr. 28.	8	27...35	11	30...41	0	1...1	76
May 19.	10	27...37	9	30...39	1	0...1	76
*June 16.	9	28...37	9	29...38	1	0...1	75

III.

A SUMMARY OF MR. HILL'S LECTURE, WITH ITS APPENDIX, ON THE SYSTEM OF NON-RESTRAINT.

Mr. R. G. Hill, House Surgeon of the Lincoln Lunatic Asylum, contends, as has been more than once mentioned, for the "Total Abolition of Personal Restraint in the Treatment of the Insane;" and, in proof that it is practicable no less than desirable, appeals to the present state of the institution in which he holds office. The essence of his opinions and observations was communicated in "A Lecture on the Management of Lunatic Asylums," &c., delivered at the Mechanics' Institution, Lincoln, on the 21st of June 1838, and afterwards published, "with Statistical Tables, illustrative of the complete practicability of the system advocated in the Lecture"—these Tables (numerous and most elaborate) forming, together with Minutes of "Proceedings relative to Classification, Inspection, and other matters bearing upon the subject of Restraint," a large Appendix to his work. In justice to him and his coadjutors, to the subject itself and to all concerned in it, some additions must be made to the previous notices of these Documents.

In the first place, Mr. H. makes an honorable acknowledgment—namely, "that the principle of Mitigation of Restraint, to the utmost extent deemed consistent with safety, was ever the principle pressed upon the attention of the Boards of the Lincoln Asylum by its humane and able Physician, Dr. Charlesworth: at his suggestion, many of the more cruel instruments of restraint were long since destroyed, very many valuable improvements and facilities gradually adopted, and machinery set in motion which has led to the unhoped-for result of actual Abolition, under a firm determination to work out the system to its utmost applicable limits." (Preface.) In short, to the steady support of that Gentleman, "under many difficulties," Mr. H. ascribes in a great degree the success which has attended his labours; and, indeed, it is perfectly evident from the Appendix, that the influence of Dr. C. was all along most beneficially directed towards the abatement of coercive measures, though, perhaps, till of late he did not expect they could ever be entirely superseded.

Passing by several remarks—appropriate in a popular lecture—regarding the former mal-treatment of the Insane, the meliorated system of modern times, introduced by Pinel, adopted by the Society of Friends, and, it is hoped, universally approved in theory, if not universally acted on—we come to Mr. Hill's special announcement:—"*I wish to complete that which Pinel began.* I assert, then, in plain and distinct terms, *that in a properly-constructed building, with a sufficient number of suitable attendants, restraint is never necessary, never justifiable, and always injurious, in all cases of Lunacy whatever.* I assert the possibility of the total banishment of instruments of restraint, and all other

*This is the last Report under Dr. Browne's signature. Since then, only five instances of Restraint appear on the Register—namely, of dates 23d same month (1), 12th and 19th January following (1 each), 13th and 20th April 1839 (2 and 1 respectively),—the Patients being three in all, and one of these requiring it with a view to healing an ulcerated leg. But I have to state, that, in regard to the two others who had long been accustomed to such confinement—in consequence of bad habits and deficiency of attendants—the temporary imposition of muffs or straps was found necessary. Not a single male has been under the slightest Restraint for many months.

cruelties whatsoever." (P. 21.) For a very particular reason, the last words of this quotation, "all other cruelties whatsoever," though not marked emphatically by Mr. H., ought to have been so, as the reader will soon perceive, if not already convinced by an incidental sentence elsewhere. (Report, p. 207.) But to proceed:—This announcement is followed by official documents which gradually unfold the adoption of a plan of treatment without restraint, as illustrated in various cases. These need not be detailed here, and, in reality, can be paralleled in every well-conducted Asylum. Supposing them admitted, therefore, and to be quite applicable, it may be demanded of Mr. H., "What mode of treatment do you adopt, in place of restraint? How do you guard against accidents? How do you provide for the safety of the attendants? In short, what is the substitute for coercion?" Mr. H. answers in few words:—"*Classification, watchfulness, vigilant and unceasing attendance by day and by night, kindness, occupation, and attention to health, cleanliness and comfort, and the total absence of every description of other occupation of the attendants.* This treatment, in a properly constructed and suitable building, with a sufficient number of strong and active attendants always at their post, is best calculated to restore the Patient; and all instruments of coercion and torture are rendered absolutely and in every case unnecessary."

As to one of the requisites essential to the success of his plan, Mr. H. gives some explanatory details, which may be usefully abridged.

The Classification, being of two kinds, each of which is divided into three—namely, I. Degrees of Rank, according to payment, 1st, 2d, and 3d., and II. Classes of Insanity, *Convalescent and Orderly, Moderate, and Disorderly*—demands a proper number of Apartments, Dormitories, Galleries, and Courtyards. During day, the Moderate Patients of the 2d and 3d ranks have the use of Galleries and Sitting-Rooms in front, on the ground and first floors of the building, having a southern aspect; and the Disorderly of the three ranks use those which project northward from the back of the wings, having respectively eastern and western aspects; while, besides the Patients of the three ranks having at all times access to the Courts, the Convalescent and Orderly, and the Moderate, are allowed free exercise on the front lawn: as an indulgence, the quieter accompany the Porter to town—one or two at a time, and occasionally several females go out together into the fields. The night apartments consist of 2 open Galleries or Dormitories, each with 18 beds; 2 Watch-rooms adjoining them, each having 8 beds; 4 rooms with 2 beds each, 4 with 3, and 48 with 1—besides 2 Infirmaries, each of which has 3. The long Dormitories are allotted to suicidal Patients—the beds in the Watch-rooms to those who destroy bedclothing and to epileptics—the 2 and 3 bedded rooms to the harmless and convalescent—and the single bedded to the harmless, noisy, violent, or insensible. Regarding the last of these, meaning such as do not attend to the calls of nature, Mr. H. says very cogently—"Recent observation has convinced me that if Dormitories could be provided for them also, *with night watches*, such might speedily be restored to habits of cleanliness. This plan has been attended with the happiest effect in some instances: and indeed we have now few Patients who are dirty in the day time: why then in the night? Simply because they can be attended to only in the day time; and if this attendance could be given also in the night, cleanliness and self-control would speedily supervene."

As might be expected, Mr. H. particularly specifies various subsidiary matters—the use of the warm-bath, washing of feet and head, change of linen, ventilation, &c., on which it is unnecessary to dwell here.

As to the 3d requisite, he may be quoted freely. "The system of watchfulness is one which cannot be dispensed with. The attendants must not be employed in any other way—their whole time and attention must be occupied with their charge. They must not be frequently changed—a change should never be made without actual necessity. They must be well remunerated, in order to secure persons of character and trust. They must not speak angrily to the Patients: nevertheless they must be firm and determined in their demeanour towards them. An attendant ought on no occasion to have more than twelve or fifteen Patients under his care. The same number of violent Patients will require at least two to observe them."

Then, as to general remarks, a few may be selected. Having stated that medicine is of little avail in the treatment of the Insane, except, of course, when labouring under diseases to which they are liable as well as the sane, he says—

"*Moral treatment, with a view to induce habits of self-control, is all and every thing.** They should, if possible, be watched without leading them to suppose that they are suspected of any thing improper or injurious. It is essential, however, that the Patient should be aware that he is *observed*, though not *suspected of wrong*; and aware also that the person who observes him is powerful enough to control him. Habits of self-control and cleanliness are both essential to recovery, and yet cannot be attained by a Patient under restraint. Out-door employments with moderate exercise—cheerful society—the occasional presence of friends and even of visitors—healthy recreations and amusements—the enjoyment of the sweet music of spring, of a calm summer evening—the care of a garden, or a shrubbery, or the cultivation of rare and choice flowers—all unite in producing a healthy tone, and giving nerve and vigour to the shattered mind. No Patient should be *compelled* to work in any way. Sedentary employments are not good. The offices of religion have a soothing and favorable effect on many. I have found the use of evening service, and the calm and sober strain of piety which pervades the Liturgy, to be well adapted to these unfortunate beings. Religious excitement of the feelings is always bad, and has brought a great number of Patients to this as well as to every other Asylum. A Patient should never be terrified. Their feelings should be consulted as far as possible: the bath of surprise, the rotatory chair, and all such devices, cannot have a good effect. Undivided personal attention is now altogether substituted in this establishment for the use of Instruments."

"When appointed House-Surgeon," continues Mr. H. very honestly, and he speaks what many have had cause to acknowledge—"I confess I was but inexperienced; for, on finding Patients under restraint, I kept them so; merely because the attendants wished me so to do. Had their wishes alone been consulted, no doubt such treatment would have continued to the present time; but I soon observed that the wish on their part was a mere pretext for idleness; and a short time subsequent to this, I refused altogether to comply with their requests. Matters went on pretty well for three months; when the calls for restraint appeared so urgent that I was induced to give way, and again the inmates were treated on the old principle. This was kept up for a few weeks, during which time I bestowed much attention on the Patients, and observed frequently and assiduously the conduct of the attendants towards them. At length I felt convinced there was little occasion for restraint, and resolved within myself to discontinue its use altogether. With this determination, I set at liberty those that were actually coerced; and from that time to the present have had no occasion to resort to such measures, except in a few instances, which arose, as I have before stated, from the unfinished and too crowded state of the establishment. For a while after this, I was frequently applied to for restraint; but on each occasion I have refused it on the ground that it was unnecessary, having first visited the Patients, and inquired into the circumstances. Thus it appears, that unless a Superintendent himself actually inspects the whole, and sees that his directions are accurately observed, he may be imposed upon, and the Patients exposed to unnecessary severity."

Well aware that, in certain cases, restraint may be required—*owing to the imperfect adaptation of the building, or to a want of sufficient attendants*, Mr. H. considers a preference due to the most simple means by which it can be effected. "On such an occasion," says he, "I do not know of any constraint which would be preferable to that of seclusion in a darkened room. In this Asylum, when a Patient misconducts himself, he is immediately removed to the Refractory Patients' Gallery, where he remains until he has pledged himself that his future conduct shall be more orderly. This is the only method I employ to induce habits of self-control. *A maniac is seldom known to break his word.*"

Mr. H. is of opinion that violent cases would be very rare in all Asylums, if the no-restraint system were adopted in them; and that suicides would also, if, in addition, dormitories, and night-watches, were established, without which, he admits, restraint may be necessary in cases prone to self-destruction; while, as to those of insensibility to natural calls, he conceives, that, under the same system, they would be seldom met with. "To ensure the non-existence of such

* It appears, from Mr. H.'s statement, that, at Lincoln Asylum as at the Gloucester, the use of the lancet, leeches, cupping glasses, blisters, drastic purgatives, and shaving the head, are totally proscribed—meaning of course, in the treatment of Insanity purely

cases," he remarks, however, "the individuals must be removed from their own homes on the first appearance of the malady, or as soon afterwards as is practicable, before such habits have been induced by the use of the strait waistcoat or other instruments which confine the fingers, and thus disable the Patient from assisting himself on natural occasions."

The preceding extracts and abstract sufficiently set forth Mr. H.'s plan and principles. The remainder of his Lecture is occupied with the consideration of *obstacles*. These are three—the expense of providing a suitable building such as he describes—the prejudice which has to be encountered—and the unwillingness of attendants, nurses, &c., to undertake the additional trouble required. As to the first, he says truly—"If it be worth while to provide an Asylum for the Insane, it is worth while also to render that Asylum complete for its purposes; otherwise the main object of the charity—the restoration of the afflicted, &c., or providing for their comfort if irrecoverable—fall at once to the ground, and the Asylum becomes a mere prison. Then as to the second, which rests mainly on dread of consequences should restraint be given up, an appeal is made to facts, the import of which will be easily understood from a Table. The third is unquestionably the greatest, considered practically, as may be well imagined; and can only be overcome, Mr. H. thinks, by ample remuneration.

One passage claims special regard. "It must be borne in mind, that the attendants are, or should be, tall and powerful in appearance. A diminutive person would be liable to be attacked: not so with the former; for a lunatic is perfectly aware (as is a sane person) with whom he has to deal. The attendants should be able to keep control without even the appearance of anger; and their demeanour and directions should be firm and decisive: nevertheless, this firmness must be always tempered with kindness; for a maniac may be drawn, when ill usage could but irritate him. I have been threatened several times, but never met with *any injury*. I have always been able to withdraw their attention, and they have generally afterwards expressed their regret for any roughness of their conduct towards me. One or two kind expressions I have generally found sufficient to assuage any feelings of anger or of violence; and much will always depend on the demeanour of the Superintendent, as well as of the attendants."

Mr. H. concludes thus: "Shall such a plan want advocates? I know it will not. I feel confident that it only requires to be made known to be duly appreciated. Show its success, and humanity will compel its adoption. The Legislature of our country deem not the welfare, the comfort, and happiness, of any portion of the people, a subject unworthy of its consideration; and if instruments of cruelty are in the habitations which assume the names of a Refuge, an Asylum, a Retreat from misery and woe, let the Government (when convinced of its practicability) banish them by law for ever! Let not the deeds done in an Asylum render its very name a mockery. Let it be indeed a Refuge from distress; an Asylum not in name, but in deed and in truth;—a place where the sufferer may be shielded from injury and insult—where his feelings may not be uselessly wounded, nor his innocent wishes wantonly thwarted. Here let him seek, and seek not in vain, that peace and comfort which are denied him in the paths he has formerly trod. Here let him repose until the light begin to dawn on his benighted mind, and he confess, with heartfelt joy and gratitude, that the day he entered a Lunatic Asylum was indeed a blessed day."

The Minutes of Proceedings, appended to the Lecture now analyzed, commence so far back as 1821, long before Mr. Hill's appointment, and, on several accounts, are of great value, but can only be glanced at in this place—after premising that, by the Original Rules of the Asylum (1819), no forcible means were to be employed in administering medicines without specific orders from the Physician; and that the attendants were prohibited from using any degree of restraint or violence without consent of the Director.

First, then, it appears, from various entries, that, owing to the insecurity or defect of the building, with the want of adequate fences, several Patients were kept almost constantly fettered; while, in regard to classification, the Asylum was in an imperfect and very unsatisfactory state up to October 1823. Between that date and April 1827, various plans, with a view to classification, were proposed and discussed; but, though a Committee on the subject was then constituted, not one of them seems to have been adopted till some months afterwards.

A letter, from one of the Physicians, namely Dr. Charlesworth, read at a meeting in October 1828, is remarkable for its urgency on the point of inspection as an essential safeguard to Patients. Its spirit may be judged of from one or two sentences, the import of which ought to be universally recognized: "Whenever the domestic officers of an establishment are ill-disposed, or overbearing, or indolent, or for any other reason averse from observation, specious arguments will be found to preserve their domain from intruding eyes as much as possible. And so long as the formal words 'improper to be seen' are to be accepted as an unquestionable reason for shrouding from inspection, even of the weekly-appointed visitors, any insane Patient to whom they are applied, a convenient cloak will be ever at hand to cover any severity, neglect, or other abuse. The seeds of abuse exist in every institution; and the examples of other Asylums have painfully shown how difficult they are to be eradicated when they have once taken root; and how governors, the most honorable and humane, may be drawn into a misplaced confidence. Even respectable persons may, by habit, become reconciled to spectacles, which would startle a stranger, and which could not, for a moment, be endured under the public eye. The surest evidence of the good conduct of any establishment is its facility of access. No consideration should induce the Managers of a *public* Asylum to receive any Patients, whose friends show a disposition to obstruct governors and persons officially introduced, in the full and free inspection necessary for the prevention of abuses. High payments cannot compensate for the admission of cases offering so dangerous an apology for closed doors. If we permit one step to be taken in the road to concealment, another will soon follow, till in the end the eyes even of the governors themselves shall be deemed an intrusion, and their inquiries be treated as an offensive evidence of distrust. These observations are of course not intended to recommend any meddling interference with the Patients." To the honor of the Board, the sound principles of this letter were approved and forthwith directed to be carried into effect.

In December 1828, the House Visitor reported the important advantages resulting from recent improvements; but, in February following, as a Patient was ascertained to have died "in consequence of being strapped to the bed in a strait waistcoat during the night," the Board ordered the use of that mode of restraint to be discontinued, except under special written order of the Physician. The Fifth Report of the Asylum (1829), after referring to two late Legislative Acts, consolidating the whole of the existing law concerning Lunatic Asylums, notices the anxiety of the Governors on the subject of Coercion and Restraint, "well aware of their injurious consequences to the Patients, and seeing, from the late Parliamentary investigations, the deplorable results which caprice, tyranny, negligence, and, above all, a wish to avoid necessary attention and trouble, have elsewhere produced." The same document speaks of the Instruments in use, for these purposes, being collected in a single apartment, open to inspection, instead of being dispersed in all parts of the house under the control of inferior keepers; of the Governors having adopted a Register, "universally used in the Scotch Asylums," as to the time and number of instances of restraint; and of the examination of the instruments for restraint, in consequence of which a considerable proportion of those that were not of the most improved and least irritating description were destroyed.

An order in May of the same year directed the destruction of the heaviest pair of iron hobbles for the feet or legs (jointed, and weighing upwards of three pounds), the heaviest pair of iron handcuffs (above one pounds), and the worst five of eleven strait waistcoats; the Visitor's Report, in August of the same year, expresses gratification that the strait waistcoat had almost become useless; but, in the next September, on application by the Director, a belt and pair of hobbles were ordered to be placed in a Keeper's room—proof that the system of restraint, however qualified, was still sanctioned, as it seems to have been during a few subsequent years.

The Revised Rules (April, 1832) relate to Occasional Visiting, Coercion or Restraint, and Moral Treatment; but, though indicating equal judgment and humanity, imply predominance of the old principle. They strictly enjoin forbearance, mildness, and indulgence on the part of attendants, who are prohibited from deceiving, terrifying, or in any way irritating, the Patients; and, on the contrary, are directed to forgive all petulance or abuse, "and treat with equal kindness those who give the most trouble and those who give the least."

The Physician's Report of July next, after mentioning a case of restraint "on account of the insecurity of the inner Male Court," notices an order to procure "strong dresses" for Patients disposed to tear their clothes—the intention being, "by the use of these and the ordinary belt, to obviate the necessity of the muff, an instrument of restraint against which several serious objections exist"—more especially preventing the Patient from attending to natural calls, and, therefore, entailing loathsome habits. A substitute for the hobble is also spoken of—the straps and buckles forming that instrument having been found to cause severe and injurious pressure.

The Ninth Annual Report (1833) having announced recent alterations in the Building, &c., as answering all the intentions of the Governors, says, "It is unceasingly an object in this Institution to dispense with, or improve as much as possible, the Instruments of Restraint. Nothing is more easy than to multiply ingenious inventions fully effectual for the direct purpose of confinement, but injurious as encouraging the system itself: it has here, on the contrary, been the design to diminish the number of these instruments, and to simplify the construction, where vigilance and attention cannot wholly supply their place. Many restraints and privations, to the appearance of which custom has reconciled the Governors of receptacles for the Insane, as mere matters of course or unavoidable necessity, might generally be traced to the principle of saving trouble to the attendants; while the plausible ingenuity frequently displayed in obtaining that end, has been suffered to disguise its cruelty and injurious effects, and has contributed in no small degree to the popular delusion which prevails respecting the difficulty and 'mystery' of managing the Insane."

The next Annual Report notices "the rarity of even individual instances of personal restraint"—assigning, in explanation, "partly the facility which the improved construction of the building gives for the separation of the Patients into appropriate classes—partly the liberty which the enlarged airing-grounds allow for exercise and recreation—and, especially, the absence of all those engagements on the part of the House-Surgeon and Attendants which would divert them from the observation of the Patients."

In July 1834, certain instruments of restraint were ordered to be destroyed, and a Visitor's Report, next month, notices the continued "infrequency of instances of Restraint, Privation, or Severity."

The Eleventh Annual Report, after mentioning a further review of the instruments of restraint, now reduced to four simple methods, says, "Strong dresses, which cannot readily be torn, and list shoes, generally supersede the necessity of restraint even in excited cases. The object of restraint is not punishment, but security. Every instrument which could confine the fingers themselves has been entirely discarded. The number of instances of restraint has continued further to diminish." In January 1836, a night watch was ordered, with a view to safety against suicide, &c.

The Twelfth Annual Report ascribes the rapid diminution in the amount of instances of restraint to various causes—as classification, the dormitory under night watch, the ample sufficiency of attendants, &c., &c.; but, notwithstanding the fact, certain instruments were still sanctioned, and occasionally, though rarely, employed. In the next Report, 1837, it is said:—"The present House-Surgeon (Mr. Hill) has expressed his own belief, founded on experience in this House, that it may be possible to conduct an institution for the Insane without having recourse to the employment of any instruments of restraint whatever. He has certainly made a striking advance towards verifying this opinion, by conducting the male (the completed) side of the house, with but a solitary instance of such restraint, either by day or by night, during the course of the sixteen last months, &c." During the same year, the Governors, having resolved on increasing and improving accommodations, agreed to raise on mortgage, &c., the sum of £2000, with which to effect the purpose; and, accordingly, the Annual Report (1838), having noticed the loan, and consequent progress of operations, speaks of the results immediate and expected. "There is now an increased confidence that the anticipations of the last year may be fulfilled, and that 'an example may be offered of a Public Asylum, in which undivided personal attention towards the Patients shall be altogether substituted for the use of Instruments of Restraint.' The bold conception of pushing the mitigation of restraint to the extent of actually and formally abolishing the practice, mentioned in the last Report as due to Mr. Hill, seems to be justified by the

following abstract of a statistical Table, showing the rapid advance of the abatement of restraint in this Asylum, under an improved construction of the Building, Night-watching, and attentive Supervision. We may venture to affirm, that this is the first frank statement of the common practice of restraints hitherto laid before a British public. This striking progress of amelioration affords great encouragement for persevering in a system so successfully commenced; and the more so, as a corresponding decrease of violence, accidents, and revolting habits, has accompanied the change."

Another quotation from this excellent document ought to be treasured up, or rather openly displayed, in every establishment of the kind.

"The very principle of bodily coercion is unsound and unphilosophical. The popular belief in the ungovernable ferocity of the Insane, encouraged by persons more studious of their own ease and enjoyment than that of the Patients intrusted to their care, has been very mischievous, and has tended to excuse restraints and other severities, on the assumption of their necessity; whereas, in truth, it is this very practice which renders the complaint intractable, and gives to it a character of exacerbation seeming to justify both the prejudice and the treatment. Such prejudices, and their consequences, can only be corrected by opening examples of a milder management to the inspection of society, which has a deep personal concern in the mild or harsh treatment of a complaint which may affect any, either personally or through relatives and friends."

The Table referred to, being a Summary of many statements, is as follows:

Year.	Total No. of Patients in the House.	Total No. of Patients Restrained.	Total No. of Instances of Restraint.	Total No. of Hours passed under Restraint.
1829	72	39	1727	20,424
1830	92	54	2364	27,113¾
1831	70	40	1004	10,330
1832	81	55	1401	15,671½
1833	87	44	1109	12,003½
1834	109	45	647	6,597
1835	103	23	323	2,374
1836	115	12	39	334
1837	130	2	3	28

Deducting cases introduced into the Table more than once during seven years, and also those re-admitted within that period, the number of Patients restrained in the course of these years amounted to 169, of whom there remained in the House at the end of such seven years 43: and of these—

"There were discharged during 1836–7, *not having been restrained at all* during any part of such two years ..... } 11
——— having been restrained only for about *seven hours* during any part of such two years ..... } 2
Remained in the House, December 31, 1837, *not having been restrained at all* during, &c. ..... } 29
——— having been restrained *once only* (for about nine hours) during, &c. 1
43"

To this Table may be added one respecting the number of Suicides and their apparent connexion with Restraints.

Date of House Surgeon's Appointment.	Period included.	No. of Patients treated.	No. of Suicides.	Proportion of Suicides.	Rate of Coercion.
Apr. 26, 1820	10½ years	334	2	1 in 167	maximum
Oct. 14, 1830	3½	173	2	1 in 86½	
April 9, 1834	1½ } 4¾ years	120 } 242*	3 } 5	1 in 40 } 1 in 48½	medium
July 8, 1835	3½ years	246	0	0 in 246	minimum

Here, then, we close Mr. Hill's work, but by no means the consideration of his meritorious labours.

* From this Table 51 have been deducted, being the number left in the House at the time of the third House Surgeon's appointment, and therefore necessarily counted as under treatment both of himself and his predecessor.

IV.

NOTICES OF VARIOUS DOCUMENTS BEARING ON THE SYSTEM OF NON-RESTRAINT.

The 15th Report from Lincoln (1839), being the first after the publication of Mr. Hill's Lecture, confirms the gratifying statements and expectations advanced in it, as appears from the following comparative observations:—"Of the great extent to which the general condition of the Patients has been ameliorated, some judgment may be formed from a review of its early state. There might be seen (amidst the Quiet and Convalescent Patients) some in strait waistcoats, or wearing padded iron collars, heavy cumbrous leathern muffs, belts with manacles, solid iron wrist-locks, jointed iron leg-locks or hobbles;—or in dresses inappropriate to their sex, to accommodate habits which the use of instruments confining the fingers had too often induced; while others were sitting locked in massive chairs with lime strewed underneath, or were secluded in solitary cells;—and these cruel substitutes for a steady system of watchfulness, but a prelude to the still greater miseries of nights to be spent under the same wretched system of restraint, painfully sacrificing the freedom and ease of the Patients to the leisure, or misemployment, or inadequate number, of the attendants. Such treatment has gradually given way, as a slowly acquired experience of the tractability of the insane under a milder management gave confidence and courage. At last, severity of every kind has disappeared, through the zealous co-operation of the present House-Surgeon (Mr. Hill), who, by an honest and determined application of the means placed at his disposal, has carried out the system of mitigation to the unhoped-for result of an actual abolition of the practice of personal restraint,—not any instance of which has now occurred for a period of more than *twenty-three* successive months."

And now, any candid reader may answer three questions for himself. Is there, in the whole of the preceding extracts, a single passage or circumstance to warrant a suspicion—not to say the conclusion—that the relinquishment of bodily coercion in the Lincoln Asylum appears to have been effected by, accompanied with, or productive of, a much worse system of restraint? Is it conceivable that, in an Institution, the Directors of which—men of the highest character and rank—conrt the most vigilant inspection as essential to its welfare, a much worse system of restraint than was formerly in use has been, is, or would be, deliberately sanctioned and systematically practised? Is it not evident, on the contrary, that these Directors and the Functionaries under them, thoroughly apprised of the injurious consequences arising from restraint and harsh treatment of every kind, were induced gradually to mitigate and finally abandon them, under an increasing conviction that a system the very reverse—one characterized by kindness, mercy, courteousness, the most unqualified forbearance and compassion towards the Insane—is in point of fact no less superior as a remedy than it is both more agreeable and philosophical in theory? Insinuations and direct charges of evil, nevertheless, have been repeatedly advanced, and, if at all correct, must both greatly depreciate the system, and entail a painful responsibility on its propounders. Let us examine them.

To one seemingly forcible objection, but really a fallacy, an answer is given in the preceding pages. (Report, p. 207.) But the objection has been followed up, in the same quarter, with no small pains. "Philanthropists have not been satisfied with the achievements already obtained (alluding to the mild and gentle treatment every where approved)—they plead for still farther liberty and comfort to the Patient, by abolishing every kind of restraint whatever, and hold that all coercion-chairs, &c. &c. should be at once excluded from every Lunatic Establishment. (By the way, Mr. Hill says no such thing.) We question not the motives of the gentlemen: we hesitate in respect to the practicability of their scheme: we are doubtful if the real comfort of the Patient would be promoted by it: we are afraid that in all cases pecuniary means could not be furnished to provide keepers in such numbers and of such power as to supersede the necessity of personal restraint. As it is universally allowed that a Patient must be restrained, the real question is, by what kind of instruments is this restraint to be effected? Our manufacturers have reached their present perfect state by successive inventions and improvements in the instruments by which the work is performed: so the treatment of Lunatics will advance to perfection as new inventions take place, and new improvements are made in the instruments by which they are restrained.

"Perhaps it will be said that the hand is an instrument displaying greater wisdom in its mechanism, and applicable to a greater variety of purposes in the business of life, than any instrument that has ever been devised by the skill and ingenuity of man; but, while this fact is readily admitted, it does not follow that the hands of the keepers are the most fit for restraining the Maniac in his hours of violent hallucination. (Certainly more is *implied* than expressed in this sentence, and also in what follows.) Though the supremacy over all other instruments be readily assigned to the human hand, it must still be asked under what guidance and direction is this instrument placed? Is the keeper a being free from passion and prejudice? Does he never slumber? Has he no love of ease? Has he no desire of power? If all on his part were watchfulness, attention, calm and steady resolution, then would the human hand be an instrument for controlling the Insane, to which straps and cuffs could bear no comparison. Unhappily, however, a human instrument may have failings that cannot be possessed by inert matter. A keeper may not be wholly free from the faults by which his Patient is distinguished. He may be cunning, deceitful, irritable, and revengeful—impatient under the labour and watchfulness to which he is incessantly subjected—and not easily convinced that his peace and comfort should be disturbed by the ravings of insanity. In such circumstances, may not an unhappy Patient find a strap a more peaceful and inoffensive nocturnal companion than a drowsy and selfish attendant? (Assuming its premises, this mode of reasoning would sanction much more than is avowed.) The gentlemen now engaged in conducting Lunatic Asylums without the use of instrumental restraint have every claim to our respect—some of them have names of high authority on every subject connected with insanity—their motives are humane—their designs are to promote the public welfare. Moral influence alone, however, in subduing and regulating stubborn and refractory Patients, must be tested by a longer series of experiments, before the principle can be fully established, and be held to be of universal application." Consequently, one may be allowed to infer, the sooner these experiments commence, and the longer they are persevered in, the better. Then why argue against them, on the double ground of impracticability in the system and the preference due to another? In place of such arguments, rather more curious than convincing, the Reporter had better have confined himself to one of his positions, for which he is sure of credit in the present day—namely, that "the funds provided for the maintenance of the poor, at least in Scotland, are not sufficient to afford such a supply of keepers as to supersede the use of instruments." But, granting the deficiency as to Scotland, may not a more fortunate country both make the experiments and profit by them? The writer now quoted is understood not to be of the Medical profession, and, accordingly, his remarks may be supposed merely or chiefly theoretical. Without calling in question his judgment or observation, however, I acknowledge greater defereuce due to the practical opinions of two gentlemen with whom he is associated. They shall, therefore, speak for themselves without interruption.

"There are probably some places in England where great improvements in the matter of restraint might still be made; but in the most of those which are well regulated, the restraint used is reduced to a mere trifle. Some, we hear, have gone the length of laying it aside in all cases; but a regard to humanity imposes upon us the indispensable necessity of using some means of restraint to prevent the violence of a Patient from being fatal, either to himself or attendants; and in others, to use it as a method of cure to prevent the Patient from exhausting his strength by violent muscular exertion during a paroxysm, which, unless restrained, might end in a fatal depression.

"There are paroxyms at times so violent, that no moral influence can have any effect in alleviating them; on the contrary, they are heightened by the mere presence of au attendant. Besides these reasons, there are others which at times render restraint imperative; but as this Report is for general, and not professional perusal exclusively, we are obliged to withhold them from the public at large.

"Restraint may be either active or passive: In the former, we have the Patients and attendants perpetually struggling; in the latter, we have the means of prevention and comparative tranquillity without loss of strength. We admit that an increase in the number of attendants must diminish the number under confinement by mechanical apparatus; but what we contend for is, that if the English Lunatics, who are said to be 'non-restrained,' are like the Scotch,

when in certain states of excitement, restraint cannot be dispensed with, in all cases, without positive injury. No matter how many attendants could be got, by night as well as by day, to hold with their hands, strive, and attempt to overawe Lunatics labouring under furious, or any other kind of mania requiring restraint—from our experience, we consider such a system to be neither safe nor proper, and not to be compared to one of a mild and passive nature. It is worthy of remark, that there is at least one Patient in this Asylum who has frequently felt and acknowledged the good effects of temporary restraint, and who, on the approach of the paroxysm, cries out lustily for the straps to be applied, to prevent mischief from being committed. Occasionally, all our Patients are to be found perfectly free; and the very small number that we have at any time under mechanical confinement, is a proof that we are not advocates for restraint wherever it can be safely dispensed with. Seclusion, regulated according to circumstances, and attended with sufficient restraint to prevent mischief, we hold, in common with almost all who have had much experience in the management of the insane, to be the most effectual and the most humane means of allaying violent paroxyms. It is absolutely necessary for the sake of the other Patients. A Lunatic breaking out into a paroxysm among a number of other Patients—not to mention the danger to which his violence may expose them—would, unless speedily removed, be the cause of others falling into the same state. From almost all the Reports of other Institutions with which we are favored, we see that restraint, though used as seldom as possible, is yet considered at times indispensable; and from other information now before us, and to which we will not farther allude at present, we are convinced that what is called 'non-restraint' is a system that must injure the Patients of a certain class who are the subjects of it, as well as those in attendance upon them."

These and the preceding observations—similar in spirit and import—are quoted from the twentieth Annual Report of the Dundee Asylum (15th June, 1840.) In addition to their intrinsic force—whatever this may be—they are, it is implied, substantially supported by testimonies from other establishments; and, moreover, the last sentence, it would appear, indirectly, but most effectually, suggests the existence of a conclusive objection to the system of "non-restraint." Now, that nothing may be omitted on the same side of the question, a few supplemental authorities shall be given as companions.

Thus, then, Dr. Corsellis says, broadly and decidedly, "To permit Patients in a high state of excitement to keep up that excitement by constant muscular action, or knowingly to risk the lives of both Patients and servants, would be treatment having no more of humanity in it than the name; and it requires but little practical acquaintance with the subject at once to detect its absurdity. The result of many years' careful attention to this subject has led to the conviction that a mild and judicious restraint can never be supplied by any 'surveillance.' The presence of any individual is of itself sufficient, in many instances, to keep up the excitement; for it is a truth but too general, that maniacs regard all around them as enemies, and exhaust themselves in vociferation and attempts at violence; whilst force on the one part, and resistance on the other, keep up the unequal contest, ending sometimes in bruises or broken limbs." (Twenty-first Report of the West Riding of York Pauper Lunatic Asylum.)

In a letter to the Editor of the *Lancet*, dated March 13, 1840, the same gentleman, referring to the views of Mr. Hill and the above remarks, enters still more tersely into opposition—but, be it noticed, on one point only:—for, as to the total abolition of restraint amongst the insane, he says most expressly, "that it is practicable, I well know; that it is humane, I deny." Giving him credit for an avowal which tends materially to narrow the question at issue, so far as he is concerned, let his denial have ample justice. Supposing the case of a powerful man, labouring under high maniacal excitement, and who will not lie in bed, the question is asked "What, then, is to be done?"—and Dr. Corsellis proceeds thus:—"Two or more men, as powerful as himself, are placed on each side of the bed to keep him there. Now, admitting that these men are possessed of all the patience, kindness, and good sense that the Superintendent seeks for in the selection of servants, but too often seeks in vain—at every attempt made by the Patient to rise, they hold him down; enraged at the resistance, he strikes them, spits in their faces, swears, shouts, and becomes more and more violent; the contest is kept up (for I have not yet found the maniac who would be the *first* to yield) until both parties are exhausted. I

would then ask, which is the most humane?—To pursue such a plan as this, or placing on the Patient a pair of ticking sleeves, an article so contrived that it can neither hurt him nor be fastened too tightly, and having a narrow strap of leather communicating with the staple in the bed-stead, to prevent him from getting out, and then shutting his room-door, and leaving him for a time free from further opposition? I can only say that experience has fully satisfied me which system is the more humane, which the Patient would himself prefer, and which tends most to our grand object—*cure*. I wish it, however, to be understood that I am not advocating restraint when it can properly be dispensed with. I have no doubt that in many institutions it is carried to an unnecessary and prejudicial extent; but that it has been abused is no proof that it is an evil. I have found that entire liberty to some dangerous Patients has been followed by beneficial results; but because 'one pill has done good,' I am not disposed to decide on the wisdom of taking 'the boxful.' I have frequently questioned Patients, both between the paroxysms and subsequently to recovery, and, with very few exceptions, I have found them unhesitatingly prefer being restrained and left alone, to the terror and irritation of *surveillance*. I have been informed by those who have visited the institutions where the Non-Restraint system is fully carried out, that 'those Patients who would themselves be quiet are much disturbed and distressed by the riotous conduct of such as ought to be under personal restraint.'" To a remark of Mr. Hill's—"if a Patient be allowed his liberty during excitement, he soon exhausts himself"—Dr. C., professing not exactly to understand that gentleman, says—"If to exhaust be our object, it will sooner, and with less cost to all parties, be obtained by the obsolete practice of excessive bleeding in mania. Exhaustion is precisely the mischief we have most to fear. We must rather soothe him into tranquillity, by abstracting all those external objects which are operating on his disordered senses, whilst at the same time we take the greatest care to support the physical powers." Dr. Corsellis, in another part of his letter, refers to the concurrent opinions of "two of the most eminent Superintendent Physicians, one in Scotland, the other in Ireland." The former is nearly as explicit as himself on one point. "The practicability of dispensing with restraint, in the ordinary acceptation of the term, has, I think, been demonstrated; I have satisfied myself of the fact, but the utility of doing so is a totally distinct question."

Perhaps there needs only another authority of like import—that, namely of my distinguished predecessor, Dr. Browne, now in charge of the Crichton Institution, Dumfries, who also, however, as will be seen, admits one of the positions maintained by Mr. Hill. The passage in which he delivers his sentiments on the subject is long, but will be perused with much interest by most of my readers who are aware of his important services in the Montrose Asylum.

"Physical restraint, in the ordinary acceptation of the term, has never been employed in this Establishment; and, what is probably the consequence of this mildness and forbearance, it has not been required, with the exception of a few hours at the commencement, when there were literally no servants in the House, and when the unwonted liberty granted to some of the Patients, who had long pined under the rigour of a different system, was abused. Such experience appears to justify the conclusion that the character of insanity has undergone a change; and that, while there is an increase in the number of cases of the disease, there is happily a marked diminution of its most formidable modification, furious mania. But, although this opinion may be correct, it is very probable that the improved treatment, and gentleness, and judgment, which dictate and pervade all ministrations among the insane, have mitigated the violent and vindictive passions which it was formerly the chief object to control; and it is certain that those engaged in the care and cure of the insane, until very recently, mistook vehemence for violence, exaggerated the dangers of their position, and sought protection in coercion, where it was not only unnecessary and injurious, but directly calculated to excite the spirit of revenge and retaliation which they dreaded. From such mistaken views and motives, in general, rather than from gratuitous cruelty, restraint has been grossly abused and misapplied. The practice of this Asylum has been, and will be, conducted upon the principle demonstrated here, and elsewhere upon a larger scale, that physical restraint, popularly so called, *may be dispensed* with; but it does not follow, nor must it be concluded from this, that there do not, and will not, occur occasions when recourse to such an expedient may be both humane and beneficial. Restoration to reason ought to be the first great object of those

superintending the insane; and all modes of treatment must be estimated by their efficacy in promoting this end. The application of restraint must be put to this test. It is not enough to break the chain and bury the whip by which the unfortunate Lunatic was tormented; it is not enough to discontinue the absurd punitive and protective system which assimilated an asylum to a prison, and degraded its superintendents to the rank of timid gaolers; it is not enough that groups of men be subdued or flattered into subordination—although these are most desirable results; but the entire substitution of moral for physical restraint must be considered medically, and determined by its merits as a curative agent. In this light it may be fearlessly asserted that there are not only Lunatics who must be, but who ought to be, restrained; and that cases do occur in which it would be infinitely preferable that a strap or glove should be prescribed, than that a miserable Patient should be incessantly hunted to and fro by a pack of keepers, or that he should be allowed to exhaust himself by continued gesticulations or gyrations, or by violence of any kind. It is often expedient to subjugate the perverted will; and to refrain from so doing when upon such subjugation depends mental improvement and increased happiness, merely because the process is irksome or painful, would be as wise and as benevolent as to withhold a blister or bleeding, when they are indicated, because the Patient is unwilling to submit to the infliction. There are likewise cases of morbid terror where it would be better to coerce physically than mentally, to bind down an arm than to quell and terrify by a number of attendants. Maniacs are often the victims of diseased and disgusting appetites, of earth-eating, self-mutilation, night-watching, and many other more humiliating and brutal practices, which no viligance can entirely prevent; and which, if overlooked in order to avoid restraint and to spare the infliction of a momentary feeling of hitterness, are inevitably hurtful, often destructive to health and life. As to the extent and intensity of this feeling, much misconception exists, as will be presently shown. Restraint is repudiated chiefly upon two grounds. First, that it painfully and injuriously compresses certain parts of the body, interfering with the natural discharge of the functions of locomotion, circulation, and respiration, according to the position of the apparatus. There is, and can be, no justification or reason for applying restraint of this kind, or in such a manner, and there is no necessity for so doing. Many contrivances are now accessible to every one which effect the purpose intended, and, at the same time, do not interfere with the comfort or health of the Patient. Restraint is abused and misapplied when either one or other of these is interfered with. Secondly, it is objected that restraint irritates without subduing, gives pain to the sensitive, exasperates the violent, and degrades the rational in their own eyes. Now, the humane and enlightened Physician will never order coercion in such cases. The Patients who chiefly *require* restraint are such as are so debased as to be insensible to all other appeals whatever, and such as are, for the time, so engrossed and absorbed by their own internal emotions as to act automatically, and to be incapable of attending to any other impression. In neither of these classes is there any consciousness of the application of restraint beyond what is communicated by the muscular sense. A third and very small class, may exist, where a vicious propensity is to be corrected, or a train of thoughts to be interrupted, and where it is intended to make a painful, and thereby a powerful impression.

"These observations have been suggested by the conflicting state of opinion upon the subject. They have proceeded upon these principles, that it is rash to condemn and relinquish that, as a remedial agent, which has heretofore been employed exclusively as an instrument of oppression, and because it has been so employed; that greater force, and cruelty, and mental pain, may be inflicted in the attempt to dispense with restraint than by its application; that, so long as insanity presents the same symptoms that it does at present, the progress in ameliorating the condition of the insane must consist in substituting one description of restraint for another—as experience shows that while, for a vast proportion, moral discipline, occupation, recreation, the removal of all sources of irritation, the presence of numerous attendants, seclusion in padded rooms, and similar measures, suffice as means of re-establishing a certain degree of propriety of demeanour, there exist circumstances in which Patients must be protected from themselves, where they must be deprived of the means and opportunity to debase themselves still farther, and to commit that gradual suicide which their practices entail."

I shall only add the sentiments of one of my own Correspondents, who manifestly alludes to some such scenes as Dr. Corsellis plainly describes—if, indeed, worse be not hinted at. His letter was subsequent to perusal of my Report for 1839-40. "I do not conceive that there is much difference of opinion between you and myself on the subject of restraint. In this Institution (a very large one) I can conscientiously state and affirm that the principle of non-restraint is in every-day practice—the exceptions being so few, and those only so occasional, as not to be worth mentioning; but, on the other hand, from the experience I have had in the immediate management of the Insane, I could not go so far as to agree in opinion with Mr. Hill, that restraint 'is never necessary'—no matter how complete soever the classification and internal arrangements of an Asylum may be. This is a proposition too ultra altogether for me, much as I could desire the reverse being the case. His plan, of having 'tall,' able-bodied keepers to be in constant attendance on the refractory and dangerous Lunatics, at once conveys to the mind, as I think, a species of cruelty and severity far more objectionable than the using, with such, of even 'chains and hobbles,' a species of inanimate controlling force that I know nothing whatever about, but which it would appear, from his published statements, is not so unknown in England; but, though the Hanwell and Lincoln Asylums have been so prominently brought before the public as examples for imitation to all other similar establishments, in the way of great humanity towards their inmates by the laying aside of the restraint system (thus making a comparison of an exceedingly offensive, and, as I believe, of an uncalled-for description), yet nevertheless, it would appear, from what I have lately heard, and from sources of undoubted probity, that a system in the latter Asylum of the most heartless and cruel nature has taken the place of personal confinement, and that in the former the non-restraint plan has by no means been so universally adopted as its late Report would lead its readers to believe; and thus is carried on a deception which is not only discreditable to the parties therein concerned, but, what is still worse, highly injurious to the interests generally of our public Institutions for the cure and treatment of the Insane."

It appears, then, that this most respectable correspondent, relying on information which he deems unexceptionable—being derived "from sources of undoubted probity"—in a single sentence condenses the chief of the preceding objections to the non-restraint plan adopted at Lincoln, and held out for imitation every where else:—"A system of the most heartless and cruel nature has taken the place of personal confinement!" And thus, we are to believe, the labours of Mr. Hill, his appeal to humanity, his exhortation that the Legislature should banish instruments of cruelty from the habitations of the Insane, his glowing picture of what a real Asylum for them ought to be, his reiterated averment as to the merits, the character, and the potency of the establishment in which he was *suffered* to hold office, while his testimony is confirmed and published, after personal observation and on direct knowledge, by noblemen, by dignitaries of the Church of England, by professional and other gentlemen, whom to name is almost to compel credence—the whole tend to and are consummated "in a deception which is not only discreditable to the parties therein concerned, but, what is still worse, highly injurious to the interests generally of our Public Institutions!" Verily, the "mysteries" of all other Asylums put together fall vastly short of this single one presented at Lincoln; and yet, perhaps, so far from being real and inherent, its marvellousness will be found to depend on the eyes of spectators and the medium through which they have beheld it. How easily imbibed, how prevalent, how deeply-rooted—and no wonder!—is the conviction among them that coercion of some kind or other is absolutely necessary, and that moral agency either cannot be or is not adequate to the purpose: how astutely, under title of *experience*, does the habit of witnessing restraint, as a matter of course, persist in its dominion over them: is it not apparent that the notion of "terror" being substituted for mechanism, as if nothing intermediate or different from both were conceivable, has influenced the opponents beyond reason and evidence: in comparing the human hand and its supreme though variable guide with a ruder instrument and its passive but steady virtues, has not one of the objectors—with whom, it is evident, others concur—entirely over-looked some of the conditions on which Mr. Hill insists as essential to his plan, and, at the same time, urged a very common-place truism against deserving functionaries: has not another, in drawing the picture of a powerful maniac subjected to two modes of restraint, thrown the darkest

shades on one point, while similar, though, by supposition, not equal, hues have been studiously withheld from, or nicely softened down on, its counterpart; and has not the same individual, when balancing a pair of sleeves, with their leather appendage, against "the patience, kindness, and good sense" of attendants, both assumed freedom from opposition as the necessary accompaniment or consequent of the former, and made an admission which virtually supersedes moral qualities in the treatment of the Insane: is not his witticism about "one pill" and "the hoxful" altogether inappropriate—seeing that the advocates for Non-Restraint prescribe a just dose to each of their Patients, not inordinate doses to a few; and must not the examples on which he seems to rest so much —namely, of some Patients requesting confinement—be taken with qualification, and at the same time have a set-off in the complaints and remonstrances of many more: is there not ground to believe that one of Mr. Hill's requisites— "tall, strong, and active attendants"—has been seriously, not to say ungenerously, misconstrued,—as if, in desiring the strength of a giant, he were equally willing and accustomed to wield it, though he prohibits "even the appearance of anger," and insists on the superiority of kindness to ill-usage in assuaging the violence of Patients; and, in like manner, might not my own remark, as to a Patient (Case 12) standing in awe of the worthy Matron, be grossly misinterpreted, as if implying something altogether unlike the temper and the practice of that personage, who, I am sure, deals much more liberally in soft words and tempting comfits than in any harsh measures: is it at all probable that they who, while asserting the restraint used in well-managed Asylums "is reduced to a mere trifle," labour to show it is both essential and productive of immense advantages not otherwise attainable, should be unexceptionable judges, even without actual trial, of a plan which discards it as unnecessary, and condemns it as hurtful: can these gentlemen be perfectly correct in supposing that what they style "active restraint"—a term, by the way, not synonymous exactly with, though conveniently substituted for, "Non-Restraint" —involves and is characterized by "perpetual struggling" between Patients and attendants; while, on the other hand, its correlative—"passive restraint" to wit—besides proving effectual as "the means of prevention," against violence, escape, or suicide, for example, which every Reporter knows it is not—has also the infallible virtue of inducing "comparative tranquillity without loss of strength;" whereas it is certain that many persons subjected thereto, so far from realizing the title, fret and foam and perspire and curse and swear and become exhausted, if they be not strangled, in endeavours to render it as vain as they feel it to be an indignity and an oppression: do the same gentlemen rightly comprehend Mr. Hill's views, plainly as he has stated them, or, if so, either give him credit for good sense, or recollect one of his express declarations, when they put the case, as an insuperable objection, of "a Lunatic breaking out into a paroxysm among a number of other Patients," and, consequently, becoming "the cause of others falling into the same state," "unless speedily removed:" perceiving that Dr. Browne's ingenious and plausible reasoning issues substantially in the limitation of restraint—namely, to three classes, two of whom he represents as insensible to other appeals, as incapable of attending to any other impression, as without "any consciousness of the application of restraint beyond what is communicated by the muscular sense"—while, in regard to the third, the very intention is "to make a painful, and thereby a powerful impression,"—is it not rather extraordinary that he should object, on the one hand—grant the ground be true—to a Patient being hunted "to and fro by a pack of keepers," or being "allowed to exhaust himself by continued gesticulations," &c.—and, on the other, state that so trivial a matter as "a strap or glove" is "infinitely preferable" to what he obviously deems much more powerful, and on the premises, therefore, much more remedial: in mentioning that there are "cases of terror where it would be better to coerce physically than mentally," &c., is it not quite obvious that Dr. Browne takes for granted the main points in the controversy, and, moreover, gives a mere *dictum*, strong but not supported by evidence, in place both of argument and fact: is there not, besides, an apparent inconsistency between his reprobation of "the punitive system," and his plea for "a painful impression"—namely, that "a vicious propensity is to be corrected:" when, too, he expressly declares that "there is, and can be, no justification or reason"—nay, "no necessity"—for a kind of restraint which painfully and injuriously compresses certain parts of the body," &c., does he not, in language, sanction Mr. Hill's own views; while, as if

afraid and hesitating to carry them into effect, he looks wistfully for mechanical devices—but which and where be they—to reconcile two opposites, complete bondage and entire ease: when, again, he says "the humane and enlightened Physician will never order coercion" in cases where "restraint irritates without subduing, gives pain to the sensitive, exasperates the violent, and degrades the rational in their own eyes," does he not in the strongest manner exemplify his theoretical concurrence in the same views; though, immediately afterwards, he enjoins the application of the very means proscribed, plainly, if not avowedly, in order that the Patients subjected to them may become sensible both of degradation and pain: finally, with regard to Dr. Browne, giving him full credit for indicating the test—the medical criterion—by which restraint must be judged,—for the principles on which he has founded his own decision,—and, still more, for his large concessions in favor of what that decision rejects—can it be denied that, unhappily, the general effect of his observations *pro* and *con*, if not frankly opposed, would be—nay, is at once—to throw an unmerited halo over a barbarous system—seeing clearly that he commends it "as a remedial agent," not simply defends it as *(rarely)* needed in order to safety—and, at the same time, to discourage, as unscientific, even the trial of another, the elements of which, though employed separately and not always without alloy, are known to be of daily efficacy, while their combination in a pure state, it may be demonstrated, is equally practicable and proportionally successful: and now, to close with my correspondent, whose good sense, I am persuaded, will surmount even an "ultra proposition" when thoroughly examined, and who can have no motive for cherishing invidious surmises, I shall only ask him—firstly, if, having gone so far—doubtless with advantage—on the principle of Non-Restraint, another and a more resolute step, under suitable circumstances, be not requisite to an adverse conclusion; secondly, if, in all candour, the direct assertions of such a man as Dr. Conolly be not sufficient to dispel his scruples as to the adoption of the system at Hanwell; thirdly, if, in addition to a former statement, the new testimonials regarding Lincoln, which may be obtained, are not ample and honorable guarantee against deception, or the smallest shadow of it, in that quarter; and, lastly, if, notwithstanding prejudices, apprehensions, censures, and sturdy hostility, manifested in a variety of ways, the evidence in favor of the Non-Restraint system be not multiplying and advancing so rapidly as to render the position either of an antagonist or of a demurring lingerer somewhat more singular than euviable?

Leaving, for the present, some of these questions to be answered as they may, I am bound to show that there is special ground for the last three of the series; and in doing so, I state nearly all the facts on the subject which have reached me.

Extract from the *Lincoln Gazette* of July 28, 1840 (in which the last Reports from the Montrose and Dundee Asylums were quoted):

"Lunatic Asylums.—The public mind is now actively alive to the conduct of these important institutions, and their importance is estimated, not by the *number* of the Patients, but by the *treatment*. Having our attention frequently called to the subject, by reading and by observation, we feel the liveliest interest in any and every circumstance which presents itself to our notice. Years back, we visited both the old Bethlem and St. Luke's: the scenes of horror we then saw defy description; for slavery, as depicted in its most damning form, was liberty to what the Patients then endured. We read of a Mr. Lucett, who, by a new discovery and an entirely new mode of treatment, at once unrivetted the chains, and released from restraint the most violent Patient. A man who had been for nearly twenty years under the most horrible confinement was by Mr. Lucett, *in a few hours*, taken out of the Asylum *without any trammels of restraint;* and this was done in the face of Dr. Monro, Physician in attendance. Mr. Lucett was attended by their Royal Highnesses the Dukes of Kent and Sussex, and by the Hon. Mr. Farr, then M.P. for Oxford. In a comparatively short time, the man was restored, and for years afterwards was the leader of a band in one of the foot regiments. For this remarkable cure, the Lords of the Treasury awarded to Mr. Lucett £200. Frequently we met with Mr. Lucett, and accompanied him to see the most violent Patients, who by *mild* treatment were easily and soon subdued.

"However much it is to be lamented, and lamented it must be, that prejudice should in any institution sanction the continuance of restraints, it is much to be rejoiced at that there is a growing opinion in favor of their removal.

"Dundee, from the extracts we present, is a reluctant convert (if convert it

can he fairly termed) to the non-restraint system. It is amusing, though much to he regretted, to see the eel-like twistings in the Report: first it admits of abuses, then it claims for *humanity* the usage of restraint—then it does not deny that an increased number of attendants must diminish necessarily the numher under restraint. The old story is told of *one* Patient, out of 151, acknowledging the *good* effects of temporary restraint—not having, we infer, heen allowed to try 'non-restraint.' We refer to the extracts, which we think will tend rather to confirm than weaken the opinion in favor of *non-restraint.*

"We also refer our readers to the extracts from the *Montrose Report*, which will be found in another part of our columns; their importance will excuse their length: justice is not niggardly dealt out to the Lincoln Asylum."

"Lincoln has the honor of giving BODILY FREEDOM to the maniac; other institutions, such as Northampton and Hanwell, have SUCCESSFULLY followed. The Asylum at *Montrose* has now sent forth its denunciation of blacksmiths' hills, and has hailed the year 1840, when no item from the sons of Vulcan is to be found in the yearly accounts.

"England, mighty in arms and arts, in literature and in henevolence—the monuments of whose majesty reflect the glittering of every star of heaven, and from which not a wind can blow that has not wafted from her shores some freight of charity—has now reared a monument of mercy, surmounted with chains torn off from the limbs, both of the dark in hody and the dark in mind."

Do. do. 21st July.—"Every week furnishes fresh evidence of the advantage of the mild system observed towards Patients lahouring under the affliction of insanity. Some large public institutions, such as Bethlem and St. Luke's, have been most decidedly unfavorahle to the alteration of the system of using strait waistcoats, muffs, hand-cuffs, leg-locks, collars, muzzles, &c. &c., to control human creatures. Hanwell, which is now the largest Asylum, having hetween 800 and 900 Patients, has not only swept away the instruments of degradation and torture, but annihilated the chains of prejudice which bound down the minds of the Committee. To Dr. Conolly is attributahle the merit of boldly, *coute qui coute*, braving the storm which long-sanctioned custom and deeply-imbued prejudice would probahly raise: the result of such a trial must he satisfactory—the confirmation of it we now with pleasure publish. It is an extract from a letter from Dr. Conolly to Dr. Charlesworth:

"Hanwell, June 30, 1840.

"My dear Sir,—I received the Crichton Report a few days ago, and was surprised to find an attempted defence of restraints resting on such fanciful reasons. Every day adds to my confidence that we can do without restraints in this large Asylum. We have lately had to contend with many difficult cases, and have only become more convinced that hodily coercion is unnecessary as well as cruel. The late suicide at Bethlem was full of instruction. I am greatly ohliged hy your newspapers, and always look with great interest at what relates to the Lincoln Asylum.—I remain," &c.*

Extract from the Report of the Suffolk Lunatic Asylum, dated December 13, 1839:

"The published investigations on the later and *better*, or perhaps the *best* regulated institutions, lead to conclusions so entirely in accordance with the opinion held for more than twenty years, and invariably expressed in regard to our inmates here, that they encourage a hope that before long we shall see in

* The case of suicide, alluded to by Dr. C. as "full of instruction," was given at page 205 (Report) in the form of extract from the *Morning Chronicle;* but another statement of it, inserted immediately after Dr. C.'s letter, mentions additional particulars of no small interest. For example, one witness said, "It is customary to place uncleanly patients in the cells on the basement storey, and deceased had been frequently before placed in one of them. On her last removal, she said she would be clean for the future if she were allowed to sleep up stairs. Her uncleanliness was not the effect of medicine. She was placed in a strait waistcoat, because she was considered to be in a disposition dangerous to her own safety, inasmuch as, on Monday morning, she took her stockings off her feet, and tied them tightly round her neck. The presence of a surgeon then saved her from strangulation. Upon being told why the strait waistcoat was put on her, she said, 'Oh, don't be alarmed—I am too great a coward to kill myself.' I think that, by working her back continually against the bed, she managed to slip the waistcoat off her person. Such a thing has occurred before, but was never, to my knowledge, so cleanly done by any other patient." The question is quite legitimate—"Why have they not a night-watch at Bethlem, as at Lincoln, for patients disposed to self-destruction?"

all our Lunatic Asylums, as the test of good management, the No-Restraint Principle *entirely carried out—constant employment actively promoted, and a liberal diet universally secured.*

"This day, there are 185 Patients in the house, and no one is ill—no one in bed, or under the slightest personal restraint.

"It is hoped that the general testimony of those best acquainted with all the internal arrangements of this house will be given to the *entire* working out the principle, by the *practice*, of No-Restraint with our Patients. All *personal* confinement is *invariably* removed on the entrance at the gate; and it is very rarely indeed had recourse to again, even for an hour. Whenever it becomes *really* necessary, as in the cases of *determined* suicide, at night, it is of the gentlest possible kind that an effective guard can be."

Extract from an Address to the Magistrates of the County of Surrey by Thomas Prichard, Esq., Medical Superintendent of the Northampton General Lunatic Asylum, June 1840:

"The remarkable and gratifying revolution which has been effected in the treatment of the Insane is an event of too much interest to the philanthropist to be passed over in silence. I have given the subject a calm and dispassionate consideration; I have witnessed the restraint system carried out to an extent almost beyond belief, as well as in its milder forms; and the conclusion deliberately arrived at renders it an imperative duty that I should unhesitatingly avow myself a zealous and devoted disciple of that '*great system of kind and preventive treatment, in which all excitement is as much as possible avoided, no care is omitted, and of which the abolition of restraint is* ONLY A PART.'

"Loss of reason being the severest of human calamities, not a crime, the most exalted benevolence is evinced in the provision of a place of refuge for the sufferer, replete with every auxiliary conducive to his restoration and protection. If thus to rescue him from himself, from the misguided and terrified affection of relatives, or the cowardly brutality of the ignorant, be, in the eloquent language of Dr. Conolly, to '*imitate at humble distance the just equanimity of a higher power, on which we and they alike depend*,' what must be the spirit of that system which has converted the *asylum* into a *house of bondage*, and called to its aid the soothing agency of hand-cuffs and fetters, banished already from the prison cell? The direst necessity, implicating the well-being of the individual himself, could alone excuse such an outrage on human nature; but does it offer an effectual barrier to *self-destruction* or dangerous violence? *Daily* experience proves the *reverse;* whilst, at the same moment, Hanwell exhibits its hundreds of afflicted beings enjoying, to the utmost extent that shattered sensibility will permit, the exhilarating consciousness of freedom, undisturbed by the one and unstained by the other.

"The 'experiment' is but in its infancy, yet enough has been seen to assure us that it cannot create the maimed and bed-ridden objects of commiseration which are now to be seen dragging out a miserable and fatuous existence; the mournful, but, I trust, instructive warning, monuments of a system which had consigned them for months, nay years, to the curative influence of physical coercion. Sceptical as some may be as to the humanity of 'non-restraint,' its practicability being beyond dispute, it still possesses other and strong claims upon the public sympathy. It strengthens the directing hand of the Superintendent—where, sincerely adopted by him, inattention and neglect can scarcely hope to escape detection; the power to retaliate diminishes the probability that cruelty or violence will be resorted to in his absence; for, deprived of the ability to enforce an arbitrary and tyrannous despotism, mild and conciliatory measures must be resorted to by the attendants, as the only means of insuring personal comfort and immunity from the outbreaks of revenge. Some attendants will be cruel if they have the opportunity; but the greatest of all opportunities is afforded them when restraints are permitted. The Physician of an Asylum can *then* never *know* what enormities are practised by night or by day."

Some of the Testimonials in favor of Mr. Prichard, as Candidate for Superintendentship in the County of Surrey Asylum, bear unequivocally on the merits and sufficiency of the same system: for example, Dr. Thackeray says: "The mildness of the treatment astonished me much, as did its beneficial results:" Mr. Samuel Tuke, of York—than whom there can be no better witness—"The entire absence of restraint, with the general prevalence of order and quiet, are very striking. The number of men employed equals that of the

establishments which have carried this system to the highest point:" The Earl Fitzwilliam—"The entire absence of restraint is a very remarkable feature, and this circumstance reflects the greatest credit upon the management of the establishment:" Mr. J. Adams, one of the visiting Justices of the Hanwell Asylum—"I was particularly struck with the *placid and contented appearance of the Patients*, a sure consequence of kind and judicious treatment; and it was a great gratification to me to see the system of substituting moral for physical restraint, which has been carried out so successfully at Hanwell, in full operation here:" Lastly, Mr. F. A. Packard of Philadelphia—"My unqualified opinion of your system of management, so far as I could see its results, was in its favor. I have since visited St. Luke's Hospital, where I learned that there is a division of opinion respecting the two systems, of restraint and non-restraint. I cannot doubt that yours is the TRUE system, and will ultimately prevail."

So far as to the Northampton Asylum, which, it would seem, profitably keeps pace with that of Lincoln; and, in regard to the latter, be it carefully observed, as already hinted, one circumstance is of very striking import—namely, the non-occurrence of suicide during nearly the last five years, whereas no less than seven instances took place between August 1821 and May 1835.

It may be worth mentioning, as indicative of the revolution likely to be brought about in the public mind, that an advertisement respecting a Private Asylum (on the cover of a late No. of the *Lancet*) actually claims preference on the very ground of the Non-Restraint system being adopted in it; and, ere long, possibly, as one of my correspondents shrewdly states—"the question may be resolved into a matter of expense—chains being cheaper than attendants."

Before closing the evidence, I am bound to notice a continuation or renewal of controversy between Mr. Hill and Dr. Corsellis, though, in doing so, a feeling of regret arises in my mind that it should have assumed any other feature than becomes a purely professional subject.

Mr. Hill, having expressed himself to the effect that Dr. C.'s "candid and able letter"—formerly quoted—brought the question into a much smaller compass—meaning than when the practicability of Non-Restraint was disputed equally with its expediency or humanity—and having, *inter alia*, explained his remark as to *exhaustion*—by which he intended to signify that mental irritability sooner subsides in Patients not under restraint than in those who are under it—defends another of his positions. It relates to attendants, whom he would have to be "good-tempered, powerful men,"—whence it has been conceived that he recommended restraint through terror, while it has been suggested "that a great number of weak attendants would be less alarming." But, says Mr. H., "Practical men will not make such mistakes. A furious lunatic *cannot* be restrained by *terror*: it is an agent unknown to him. The powerful attendant does not ill-use him, nor does the Patient expect it. The lunatic merely is conscious that he cannot execute his purposes; he does not often attempt to force the powerful attendant, he does not refrain through fear from trying to force his way through a stone-wall; he is merely conscious that it is impracticable. If the walls be plaster, or the attendants weak, he may be tempted to struggle." I acknowledge the truth and importance of the observation; and farther, that what follows, though smiled at by Dr. C., seems to me far from being absurd or inconsistent with fact:—"Moreover, powerful men are more usually good-tempered, and more usually habituated to self-control, and less likely to give way to pettish, waspish spite, and peevish irritation." Every reader will judge of the assertion by his own experience. Admitting that surgical cases may require some restraint, as in common hospital practice, but without deeming this to trench on the great principle maintained, Mr. H. goes on—"As for lunatics asking to be restrained, I will say that they should not be indulged in their whim, but trained to self-control. The perverted tastes and instincts of lunatics are notorious: I would almost say that their instinct was often towards what would injure them:"—and on this point, most probably, he will meet with no opponent. Then why plead for restraint on the ground that some lunatics request it—or even find it advantageous—provided a better or less objectionable mode of securing them against evils can be devised?

Speaking, again, of a Patient who had acquired, or was in danger of, a well-known filthy habit, Mr. H. remarks that the case would only require occasional attention, and repeats his former conviction as to the pernicious effect of any restraint by which the insane are prevented from assisting themselves on or-

dinary natural calls. Then, having insisted on the practicability of dispensing with all coercive applications, and recommended "a solitary chamber" for such a Patient as Dr. C. describes, he advances to a totally different kind of objection:—"Some have angrily attacked the system from a petty jealousy that any improvement should be made on their own system, and consider every improvement a rebuke to their own former practice;" but, qualifying the censure, he adds:—"On the other hand, I feel most highly honored in a gentleman like Dr. Corsellis having noticed my endeavours, and having so candidly and fairly stated his sentiments; in a year or two, he will find the cases, supposed to require restraint, so reduced under his humane management, that he will consider the rare exceptions not to be worth retaining, and will emancipate himself entirely from a mischievous and insidious principle."

The language of the next paragraph—more especially where it is parenthetical—will perhaps be thought conclusive as to Mr. H.'s own regard for the welfare and peace of his Patients, though not restrained. "Accidents will sometimes happen in a Lunatic Asylum, and attendants will occasionally be irritated into striking a Patient (an offence which should *never* be forgiven); but such accidents will be found much more numerous where restraints are most numerous, and Patients will be found most irritating and more easy to be abused when maddened by restraint, or reduced by it to a revolting condition disgusting to the attendants. The cases of ill-usage in Asylums are invariably most frequently, and indeed almost wholly, confined to the latter class of Patients. Coercion applied under Dr. C.'s own eye may differ materially from coercion applied during his absence."

There is something forcible, though hypothetical, in the following passage, which calls for more than simple assertion on the part of antagonists:—"Where an accident occurs under non-restraint, or where an attendant strikes a Patient, there is no fair argument for restraint, unless it is shown that ordinary vigilance would not have prevented the accident, that restraint would have prevented it, and that the person would have been restrained under such a system mildly conducted, nor unless it be shown that restraint would have prevented the Patient from being struck, and also that such occurrences were carefully sought out under the restraint system, and disproved on fair, impartial evidence." Indubitably, neither system will afford perfect security in every case, and, on this very account, the most candid inquirer must encounter numerous difficulties, both as to fact and reasoning, ere he can feel warranted in deciding between them. Mr. H. concludes—"I have not yet met with such a case as Dr. Corsellis describes, of a powerful Patient continuing a struggle to rise from bed, between two attendants, until entirely exhausted. If I met with such a case, a different course would be pursued."

The letter quoted appeared in the *Lancet* of April 11, 1840, and had a rejoinder from Dr. Corsellis on the 9th May thereafter, couched, I am really grieved to say, in terms far less likely to sustain even a good cause than to provoke a disputant.

Noticing Mr. Hill's remark as to "the whims and perverted instincts of lunatics"—namely, that they ought not to be indulged—Dr. C. says, "I think not either, yet I cannot but incline to the opinion that, had such testimony been in favor of Mr. H.'s system, he would have maintained, as I do, that the preference, even of a lunatic, in a matter affecting his own personal feeling, should be respected. At any rate, he is not likely to choose that which is most painful to himself; but the deliberate opinion of convalescent and cured Patients, on such a point, is of the first importance." Passing by the inuendo as to *bias*—natural enough, though not strictly philosophical as this would be—Mr. Hill might advert, first, to the condition of the Insane as frequently precluding the exercise of judgment, and thus rendering the preference alluded to—even if expressed or understood—by no means the sole or the chief indication as to treatment. It may be very proper to consult the "personal feeling" of a Patient where no evil can result from gratification; but, as Dr. C. is well aware, there are occasions on which denial would be much more merciful. Some Patients prefer the warm to the cold bath, and lying-in-bed to either—a glass of brandy to a dose of senna—and a beef-steak to water-gruel; but the Physician, in place of showing respect to their tastes, or even to their immediate sensations, will study consequences at the hazard of giving offence. Secondly, the proposition, as to a Patient not being likely "to choose that which is most painful to himself," might be considered by Mr. H. no otherwise relevant than in so far as, ample and fair experience of both plans having been had, the decision rested on

comparison; in which case, it is clear, the testimonies, to say the least, are singularly at variance, and Dr. C. himself admits exceptions—"very few" indeed—to his own report. Lastly, on this point—while a similar remark applies to the "deliberate opinion of convalescent and cured Patients," Mr. H. might contend that the amount, or the difference in the degree, of pain, though assuredly of some, is by no means "of the first importance." Surgical operations are not recommended or submitted to, simply on the ground that they will cause less suffering than disease.

In regard to Mr. H.'s opinion that, if perfect liberty be given to a dangerous lunatic, "he soon exhausts his mental irritability," Dr. C. asks the question, "How soon?" and answers it thus—"In nine cases out of ten, just so soon as the physical powers sink under his frenzied exertions, or, in other words, he ceases to vociferate, because he is so hoarse he can scarcely speak; he ceases to kick and strike, because his arms and legs are powerless, and covered with bruises; and he lays his weary head on the pillow, tranquil from sheer exhaustion." "I should judge," continues Dr. C., "Mr. H., in his praiseworthy zeal, has never tried any system but his own. The word *exhaust* appears ill-adapted to our object. We have to allay irritation, to soothe, to tranquillize. Now, I maintain that the liberty which the poor distracted creature only knows how to abuse, tends to keep up the mental irritability." Agreeing with Dr. C., that a more appropriate term than *exhaust* might have been chosen—*e.g.*, *relinquish*, *discontinue*—I own there seems to me nothing else in the above passage that Mr. H. would be at a loss to dispose of. Obviously, he might call for proof of Dr. C.'s accuracy as to *proportion*, being so very different from what he himself has observed; and, even admitting it, as perfectly explicable by special circumstances, he might on that account retort—"Dr. C. has never tried any system but his own." Such personalities, however, are neither dignified nor useful; and, most undoubtedly, the former is contradicted by the express and candid evidence to be met with in Mr. H.'s work.

As to the occurrence of accidents, which, according to Mr. H. are more numerous where restraints are so, we have a broad declaration by Dr. C.: "Facts do not appear to bear out this statement; I think they rather tend to prove the very reverse." Here, of course, not a little testimony would be required on both sides, and, if possible, from impartial observers. Dr. C., seemingly in relation to the topic, adds—"In some public institutions with which I am acquainted, the instances of servants discharged for maltreatment are rare. In this Asylum (Wakefield), during ten years, only two have been dismissed on this account;" and it is quite certain, from another part of his letter, that he makes a contrast in the case of Lincoln. Now, without knowing more of that establishment than public reports have communicated, and presuming the facts to be such as Dr. C. mentions, I shall only remark on this point—first, that the rarity of discharge by no means proves goodness of management—secondly, that frequency of change in this respect may be readily accounted for without supposing the reverse—and, lastly, that while such frequency may be expedient or not, in relation to other circumstances at Lincoln as elsewhere, it has scarcely even an incidental bearing on either the merits or the operation of Mr. H.'s plan. If Dr. C., proceeding on grounds entirely unknown to me, be no more than just in the following exhortation, I must deplore its appropriateness without learning that it has proved salutary:—"I would say of a public institution as of a private family, where such changes are unusually frequent, your fault is less in your men than your system. Look to it that your mainspring be not wrong: you are perpetually introducing novices, by which the interest is broken, and confidence destroyed; and no sooner do they become initiated in the discharge of duties, the most difficult to which man or woman in any station of life can be called, than the benefit of their experience is lost to the Patients, and other novices take their place."*

Dr. C. makes light of one of Mr. H.'s remarks—and no wonder, as he states it:—"The novel idea of awing a lunatic into submission, by the presence of an attendant so fearfully large, that he dares not even attempt competition, and that large men are better tempered than little ones, is curious enough." Where, I would ask, does Mr. H. enjoin or require that an attendant should be "fear-

* The cover of the *Lancet* for April 11 preceding, I may observe, contained an advertisement from the Lincoln Lunatic Asylum, giving notice that a House Surgeon was wanted there—with "Three active Female Attendants."

fully large?" He conditions for "good-tempered, powerful men"—"tall, strong, and active attendants"—that they "should be tall and powerful in appearance"—and he assigns reasons why. Does Dr. C. think these are unfounded or trivial? Pinel was of a different opinion. What says he of the best mode of repressing? I shall quote from the Translation of his Treatise on Insanity by Dr. Davis (Sheffield 1806):—"The great secret of mastering maniacs of this character (the most violent and dangerous), without doing them injury or receiving violence from them, consists in going up to them boldly and in a great body. *Convinced of the inutility of resistance, and impressed with a degree of timidity, the maniac thus surrounded will often surrender without further opposition or reluctance.* An instrument of offence will, however, sometimes arm him with extraordinary resolution. A madman shall be suddenly seized with a paroxysm of phrenitic delirium, with perhaps a knife or a stone or a cudgel in his hand at the time." And what then? "The governor, ever faithful to his maxim of maintaining order without committing acts of violence, will, in defiance of his threats, march up to him with an intrepid air, but slowly and by degrees. As he advances, he speaks to him in a firm and menacing tone, and gives his calm advice, or issues his threatening summons, in such a manner as to fix the attention of the hero exclusively upon himself. This ceremony is continued with more or less variation until the assistants have had time, by imperceptible advances, to surround the maniac, when, upon a certain signal given, he finds himself in instant and unexpected confinement. Thus a scene which threatened so much tragedy, generally ends in an ordinary event. Upon the appearance of tumults (among several), I have more than once seen the Governor brave with wonderful courage the violence that threatened him, move about and mingle in the effervesence with the rapidity of thought, and provide for their instant security, and thus, in a very short time, restore tranquillity to the institution." And what was the character of this Governor, to whom Pinel avowedly owed much of his own repute? He speaks of his eminent qualities, both of body and mind—the principles of a pure and enlightened philanthropy—indefatigable attention to duty—extensive knowledge of human life, &c.—all well; but more—"His firmness is immoveable, his courage cool and unshrinking. As to his physical properties, he is manly and well-proportioned. His arms are exceedingly strong. When he speaks in anger or displeasure, his countenance expresses great decision and intrepidity, and his voice is that of thunder." Among Pinel's last observations is the following:—"One of the advantages peculiarly estimable of well-regulated hospitals, is the means possessed by them of making deep impressions on the minds of maniacs, and of convincing them that resistance to a force at once intended and calculated to master their extravagancies, and to keep them in respectful submission, would avail them nothing. This idea, which they never ought to be allowed to lose sight of, is well adapted to exercise the functions of the understanding, to arrest their delirious wanderings, to habituate them gradually to self-government, which is the first step towards recovery."*

Keeping these and other hints in view, is there any thing unreasonable in Mr. H.'s wishing "to complete that which Pinel began"—and, for this purpose,

* To avoid mistake, the reader will please observe that the Governor, of whom Pinel speaks so highly, though a perfect disciplinarian and physically formidable, gave decided preference to moral influence in managing the insane. In his system, "Cruel treatment of every description, and in all departments of the institution, was unequivocally proscribed. No man was allowed to strike a maniac even in his own defence. No concessions, however humble, nor complaints, nor threats, were allowed to interfere with the observance of this law. The guilty was instantly dismissed from the service." "It might be supposed," continues Pinel, "that to support a system so exceedingly rigorous required no little sagacity and firmness. The method which he adopted for this purpose was simple, and I can vouch my own experience for its success. His servants were generally chosen from among the convalescent, who were allured to this kind of employment by the prospect of a little gain. Averse from active cruelty from the recollection of what they had themselves experienced; disposed to those of humanity and kiudness from the value which, for the same reason, they could not fail to attach to them; habituated to obedience, and easy to be drilled into any tactics which the nature of the service might require, such men were peculiarly qualified for the situation. As that kind of life contributed to rescue them from the influence of sedentary habits, to dispel the gloom of solitary sadness, and to exercise their own facultics, its advantages to themselves are equally apparent and important."

carrying the means recommended by him to the fullest extent? But, effective service on the part of attendants is in the category of these, and hence the specification of their qualities. Dr. C., it seems, is content with less or fewer. "For my own part," says he, "I have never found any thing more than good common sense and sterling principle as indispensably requisite in servants: I believe we shall be better aided in our endeavours by the judicious assistant, possessed of that peculiar tact which can be acquired only by a practical acquaintance with the treatment of the insane, whatever his stature may be, than by the presence of a whole host of giants." Mr. H. might retort:—Yes, indeed, the *physical* consideration may be, and probably is, of small or no moment, where there exists sufficient *peculiar tact*—to employ coercive measures for example—but it is the very reverse of being insignificant when these are altogether discarded. I would add my own suspicion, moreover, that Dr. C. himself, in case of competition for office under him, would be not a little apt, *cæteris paribus*, to give way to a very natural as well as ancient feeling, by preferring an individual who, besides "common good sense and sterling principle," had some of the qualities of a Samson or even a Goliah. I am quite persuaded, too, that his refractory Patients would be much more likely to keep peace in presence of such a formidable personage than under the regime of one of Captain Gulliver's Lilliputians. As to the usually superior good temper of large men—on which Mr. H. places some reliance—I scarcely imagine there is occasion for any recondite learning, the prejudice to that effect being pretty notorious. But, by way of balancing accounts, I may tell Dr. C. there is an Italian proverb which an old English writer thus renders—

> If little men were patient,
> And great men were valiant,
> And red men were loyal,
> All the world would be equal;

and on part of which—no doubt with small pretensions to physiological accuracy, but in favor of Mr. H.—the comment is—"a little man having his heate so united and compacted together, and not dispersed into so vast a carkasse as the big man, therefore he, by temperature, possesseth more spirits, and by them becometh more nimble, lively, chollericke, hasty, and impatient."—(The Passions of the Mind in Generall, London, 1621.)

Dr. C. now relates a case in illustration of the value of judicious restraint. A very good one it is, but, in my humble judgment, neither conclusive as to his own creed, nor better than what might be selected from the opposite school; while the Patient's acknowledgment, that "he considered the salutary restraint to which he had been subjected the cause of his recovery," to give it all credit, is simply at par with the statement of another under Mr. H.'s care, "that the irritation of personal restraint had occasioned the excitement she at first exhibited." The truth is, testimonies of the kind—I mean on both sides—are very numerous, and must be carefully sifted with a view to sound deduction. In no department of medical science, I apprehend, is there greater liability to confound the *post quid* and *propter quid* than in that which relates to mental disease.

The conclusion of Dr. C's. letter is in terms so unusually caustic and vehement that I have extreme disinclination to quote it, and the rather, because, not knowing the particular motives for such expressions, I deem omission more just to all parties than the defence of any. As, however, Dr. C. admits the possibility of the system being found "a valuable improvement in science for which the originators well deserve from the medical profession, and the insane world at large, the warmest thanks and the most profound respect," I may be allowed to hope that the zeal with which he has opposed its pretensions will ere long be no less conspicuous in advocating its merits.

Far be it from me to urge the preceding interrogatories, with the above extracts, discourteously, or under the idea that they will and must be all viewed in one and the same direction. I have adduced them as expressive of my own solicitude to be correctly guided in a matter of really vital importance, and not without a hope of eliciting safe truths by honest controversy. The responsibility attached to the Superintendent of a Lunatic Asylum is immense—in one sense, absolutely fearful. Despotic over his Patients, as he is or may seem to be, the minutest circumstance affecting one of them, besides directly taxing both his judgment and his feelings, must have some relation to the general principles

by which his government is characterized; and, touching these, their application on the whole, the deviations from them in special cases, with their varied and ever-varying results, he must be ready to afford explanations at several tribunals. His duties within doors are very onerous, and have to be performed among individuals widely different in many respects. He has to contend with ignorance, caprice, aberration, despondency, cunning, malevolence, fury; in short, with a multitude of evils, which he is expected both to understand, and, as far as possible, to remove or at least overrule. He is amenable for every particular in a mass of events, always diversified, often contrarious, not rarely inexplicable, to friends and relations, visitors, governors, and guardians, the public at large. I shall not speak of a still higher reckoning. But, numerous and trying as his daily engagements are—and, indeed, it is impossible to describe them in a narrow compass, if at all intelligibly—he would as certainly decline in utility and repute as neglect the welfare of his charge, did he become indifferent to numerous discussions and revolutions beyond his own circumscribed province. One of his main qualifications, in point of fact, consists in the spirit, moral no less than intellectual, with which he treats these. Scepticism, most sage as some may deem it, cannot be a recommendation, because it would leave him behind competitors and incapable of improvement; facile credulity, on the other hand, besides showing weakness, might embrace novelties without profit, and involve the relinquishment of plans which something better than age has sanctioned. Neither of them is philosophical, and, perhaps, in no department could they be more pernicious than in that which relates to insanity. How, then, is an individual, humble yet anxious, to comport himself, when—not a trivial matter of detail, but—a principle, at once extensive and influential, is held forth on the most inviting grounds, while the adoption of it may be fraught with incalculable mischief? In vain shall he seek refuge under the authority of great names—if even these be not divided: the very act of preferring some to others may be equivalent to, and the result of, a foregone conclusion totally unjustifiable: the number on one side or other, though it might be easily ascertained, would afford an inadequate test of accuracy, seeing how easily and how frequently a multitude may err; while to be right, is sometimes the portion of a few only, and to be always so, the prerogative of none. The hope of support by a party, however respectable, would be a sorry excuse for espousing any doctrines whatever; and even the certainty of it, so satisfactory when fairly gained, will not solace the mind that receives them without inquiry, or advocates them without conviction. A man who desires the stability of truth—the only safeguard in science as in morals—must be no less diligent and sincere in ascertaining than resolute and devoted in appropriating it.

Thinking these remarks to demand and to countenance such a scrutiny as has now been undertaken, an ample confession is nevertheless due from me. It is not limited to the fallibility shared with all men—to the small scale on which my own observations have been made—to the scantiness or imperfection of the *data* elsewhere derived on which my judgment has been exercised—to the possibility, predicable of every inquirer, that, from inadvertence, lack of discrimination, faulty inference, incidental or other peculiarity, I may have missed or fallen short of my professed object. I plead guilty to what Lord Bacon, in his enumeration of the causes of error, styled *idola specus*—"idols of the den,"—notwithstanding the injunction, that he who studies nature should distrust those things with which he is particularly acquainted, and which he usually *contemplates with pleasure*. A certain prepossession, be it right or wrong, unavoidably influenced both my survey and its result. Consistently with long-formed opinions, I rejoiced to think, and was therefore inclined to believe, that Insanity, from what seemed to me its very nature, would be found medicable, if medicable at all, by other means than compulsion of any kind whatever. In this respect, where its existence does not depend on congenital formation or organic lesion, the disease, according to my views, has an affinity with *moral evil*, the removal or subjugation of which can only be effected through the understanding and the will—those great principles, each susceptible of subdivision, by which the real life of man is constituted. United in their source, as we must deem these to be, and, at the same time, intended for the best of purposes, yet, such, in point of fact, *is* the condition of our species, they are not simultaneous or always concurrent in operation; while, unhappily, both are liable to grievous perversions, as judged of by any system of laws whether natural or revealed. Were man invariably to imbibe only what is true, and as invariably to desire only

what is good, he would be no less perfect in his kind than any of the lower creatures by whom he is surrounded. But of none on earth can this position be correctly affirmed. Sound theology and daily experience prove the very reverse. Our judgments are frequently deceived, our affections are no less frequently misplaced—they react on each other—the morbid compound is beyond human skill to cure. Punishment, whether its necessary consequence, or arbitrarily imposed, may check the outbreakings of evil, but cannot eradicate or transform it. The great Author of Goodness and Wisdom hath made known the remedy, and invites us to be His patients. We are healed in proportion as we submit—for His "law is perfect, converting (restoring) the soul—His testimony sure, making wise the simple—His statutes right, rejoicing the heart—His commandment pure, enlightening the eyes—His fear clean, enduring for ever—His judgments true and righteous altogether." When the Psalmist, in most emphatic language, adds—"More to be desired are they than gold, yea, than much fine gold; sweeter also than honey and the honey-comb; moreover by them thy servant is warned, and in keeping of them there is great reward," he points, not only to their universal efficacy as preceptive and admonitory, but also to their harmony with the principles of human nature, how greatly soever these may have gone astray. In the subsequent announcement of "the tender mercy of our God"—the declaration of "good tidings of great joy"—"on earth peace, good will towards men," we witness the same gracious condescension and suitableness, as if infinite Love and Truth had special delight and exercise in winning over, not forcing, captives to their own blessedness. The Divine procedure, thus and throughout manifested, is surely worthy of imitation, wherever ignorance has to be enlightened, weakness pitied, affliction mitigated, perversity reclaimed. Disguise and dignify it as we may, an opposite course will never have more than the semblance of prosperity: in no respect can "the wrath of man" work "the righteousness of God:" it is a faithful and a forcible saying, worthy of all men to be received, "that mercy rejoiceth against judgment." Modern legislators, and communities in general, appear becoming more and more alive to such views. They have begun to act as if they were convinced —and well they may be, that it is of the nature of kindliness, equally as of cruelty, to generate its like; and that, in consequence, the safest as well as most agreeable policy is to multiply beneficent acts rather than penalties, to elicit good rather than avenge evil. As to one dreadful alternative, how many millions exist in every land ready to join with Franklin—"I have lived long enough to be persuaded there cannot be a bad peace or a good war?" What but the influence of a like spirit could have brought about the recent nearly universal sentiment, with its practical consequences, that, as one of the ablest and most amiable converts, Sir Samuel Romilly, expressed himself, "Penal legislation hitherto has resembled what the science of physic must have been when physicians did not know the properties and effects of the medicines they administered?" What extraordinary light does not the same individual, giving the testimony of Mrs. Fry as to Newgate, throw on the positions already advanced —"Her observations are the more valuable, as she has had such opportunities of seeing and conversing with the prisoners. She told me that there prevails among them a very strong and general sense of the great injustice of punishing mere thefts and forgeries in the same manner as murders; that it is frequently said by them, that the crimes of which they have been guilty are nothing, when compared with the crimes of Government towards themselves; that they have only been thieves, but that their governors are murderers. There is an opinion, too, very prevalent among them, that those who suffer such unjust and cruel sentences are sure of their salvation: their sufferings they have had in this life, and they will be rewarded in that which is to come. All the crimes they have committed, they say, are more than expiated by the cruel wrongs they are made to endure. She spoke of the docility she had found, and the gratitude she had experienced from the female prisoners, though they were the most profligate and abandoned of their sex. Kind treatment and regulations, though of restraint, yet obviously framed for their benefit, seem to have been alike new to them; and to have called forth, even in the most depraved, grateful and generous feelings."—(Diary of his Parliamentary Life—27th February, 1818.)

How eloquently and justly does Mr. Livingstone, speaking of what has been called "the silent system of Prison Discipline," depict the same impressive

truths. "Fear is the great principle of this institution, and chastisement of the most degrading kind is the instrument to excite it. A superficial view of this subject has led to the belief that the great secret of penal legislation is, to annex a penalty of sufficient severity to every offence; and, accordingly, all the variety of pains that the body of man could suffer, infamy and death, have figured in the codes of all nations; but they have never produced the expected effect. The reason is to be found in that insurgent spirit with which man was endowed by his beneficent Creator, to answer the best ends of his nature. The same feeling that, elevated, refined, and applied to the noblest purposes, animates the patriot to resist civil tyranny, and the martyr to defy the flames; when it is perverted, and made the incentive to vice and crime, goads on the convict to arraign the justice of his sentence, to rebel against those who execute it, and to counteract its effects with an obstinacy in exact proportion to the severity of the punishment. The convict, therefore, who has performed his daily labour, even for years, under the pang or the dread of the lash, will be rather less deterred from the repetition of his crimes, whenever he thinks himself secure from detection, than he would have been by a milder discipline; because the spirit of hatred, revenge, and a desire to retaliate on society, are stimulated and strengthened by the principles which I have supposed to be inherent in our nature." (Introductory Report to the Code of Prison Discipline for the State of Louisiana.) And how cogently does Dr. Julius, reporting to the Prussian Government, express himself on a vital point:—"I declare candidly, that, upon an examination of my own conscience, and the knowledge I have acquired of the different systems of prisons in Europe and America, none has appeared to me to present so much equity and justice in the infliction of punishment, or affords so many chances of reformation, as that of solitary confinement, combined with the regular visits of the officers of the prison—such as the inspectors, chaplain, governor, and medical man. I say *chances* of reformation, because human efforts are necessarily limited, and can only go so far as to ward off, as much as possible, every impediment likely to prevent the influence of Divine grace, which is the only source of good, and can alone accomplish the real reformation of the guilty."* Most superfluous, though most easy, it would be to multiply evidences of the revolution that has of late taken place, not by any means so much in plans as in fundamental principles, throughout nearly all the great departments of our social economy. Every contemplative reader will be prepared with his own favorite examples of it, and cannot fail, on reflection, to attribute them, as parts of a whole, to the agency of one and the same great cause, even of Him, "the Father of Lights," from whom "every good gift, and every perfect gift, cometh down," and who, having "no variableness neither shadow of turning," is pleased more and more to pour forth healing beams upon our lower world.

Professing, with gratitude, to have entire trust in Him "whose never-failing Providence ordereth all things both in heaven and earth," it is neither fanatical nor presumptuous to hope for, and insist on, the paramount efficaciousness of the same principles and line of conduct in treating mental derangement. To repeat the language already quoted, I concur heartily with Dr. Conolly in thinking that the most unqualified clemency we can extend towards the insane is no more than an endeavour to "imitate at humble distance the just equanimity of a higher power, on which we and they alike depend;" and that the likelihood of success regarding them must be proportioned to our fidelity in prosecuting a "great system of kind and preventive treatment, in which all excitement is as much as possible avoided, no care is omitted, and of which the abolition of restraint is ONLY A PART." The words are emphatic—"only a part,"—a small one indeed, rather a negative—the mere withdrawal or rejection of any and every agent, physical or mental, by which the faculties of understanding and will would be obstructed in their exercise under a benevolent and enlightened government. That government, of course, recognizes positive and essential elements, deducible primarily from the doctrines and precepts of sacred truth, to which, therefore, it is at once our privilege and our duty to have perpetual recourse. We cannot possibly receive them sincerely and affectionately without experiencing peace and consolation in our own hearts: we can-

* Quoted, with many similar Observations, in the First Report of the General Board of Directors of Prisons in Scotland.

not conscientiously and undeviatingly obey them, in our conduct towards other men, without beholding how superior the Divine gift, even the Spirit, not of fear, but "of power, and of love, and of a sound mind," is and ever will be to the passions of human nature. Among all the sharers of that nature, none have higher claims on the truly Christian virtues than those in whom its chief features are impaired, deformed, and made pitiable by disease.

I have cause to regret, that the Fifty-first Report of the Visiting Justices of the County Lunatic Asylum at Hanwell, containing the Report of the Resident Physician, Dr. Conolly, dated October 31, 1839, did not reach me till the preceding remarks were in the press. Happily, however, sufficient time and space remain to allow a few extracts from the latter. Of their singular importance, every candid and intelligent reader will think justly.

"Without any intention of derogating from the high character acquired by the Asylum, it appeared to him that the advantage resulting from the degree of restraint permitted and customary in it, at the period of his appointment, was in no respect proportionable to the frequency of its application; that the objections to the restraint actually employed were very serious; and that it was in fact creative of many of the outrages and disorders, to repress which its application was commonly deemed indispensable, and, consequently, directly opposed to the chief design of all treatment, the cure of the disease. The example of the Lincoln Asylum, in which no Patient has been put in restraint for nearly three years, came also powerfully in aid of an attempt to govern the Asylum at Hanwell by mental restraint rather than by physical.

"Such an attempt could not be extended to all cases without some immediate inconveniences. Attendants accustomed to rely on the easy help of close restraints, were reluctant to abandon them, and unexercised in the resources without which their abolition produced inconveniences, which they were not likely or able to compare with the remote evils produced by their continuance. Nor would the Resident Physician yet presume to say that strong restraint may never be required; but he begs to lay before the Visiting Magistrates a simple statement of the progress of an attempt to do without it. By a list of Restraints appended to this Report, it will be seen that the daily number in restraint was in July so reduced that there were sometimes only four, and never more than fourteen in restraint at one time; but that since the middle of August there has not been one Patient in restraint on the female side of the house, and since the 21st of September not one on either side.

"There have, however, been occasional and brief instances of restraint, unsanctioned, in some cases, by the physician, and which do not appear in this table; but it correctly represents the total absence of continued restraint during the whole period since August 9th. For Patients who take off or destroy their clothes, strong dresses are provided, secured round the waist by a leathern belt, fastened by a small lock. For some who destroy the collar and cuffs of their dresses with their teeth, a leathern binding to those parts of the dress is found convenient. Varied contrivances are adopted, with variable results, for keeping clothing on those who would otherwise expose themselves to cold at night; and warm boots, fastened round the ancles by a small lock instead of a button or buckle, are sometimes a means of protecting the feet of those who will not lie down. As it is now and then necessary to confine the hands when a blister is applied, to prevent its removal; and as this, like all other temporary restraints applied with the justifiable plea of protection, is generally abused by being too much prolonged or unnecessarily severe, a kind of cape, as a covering for a blister, capable of being secured over it, has been thought of, and will no doubt be found practicable. Those who are in the habit of striking suddenly, tearing the bed-clothes, &c., sometimes wear a dress of which the sleeves terminate in a stuffed glove without divisions for the thumb and fingers. But no form of strait-waistcoat, no hand-straps, no leg-locks, nor any contrivance confining the trunk or limbs, or any of the muscles, is now in use. The coercion-chairs, about forty in number, have been altogether removed from the wards: no chair of this kind has been used for the purpose of restraint since the middle of August.

"It may be considered yet too early to pronounce a positive opinion on the general effects of these measures. In so large an asylum, filled with pauper

lunatics, the means of mere mental control must always be limited, and the discontinuance of cruel restraints may only slowly be appreciated by the Patients. But the Resident Physician is inclined to believe, after as careful observation at all hours as the space of a few months has permitted, and notwithstanding some peculiar difficulties, that the noise and disorder prevalent in some of the wards has already undergone diminution; that instances of frantic behaviour and ferocity are becoming less frequent; that the paroxysms of mania to which many of the Patients are subject, are passed over with less outrage and difficulty; and that, if cases are yet seen which appear for a length of time to baffle all tranquillizing treatment, they chiefly, if not exclusively, occur in acute mania, the symptoms of which would be exasperated by severe coercion, or among those who, having been insane many years, have been repeatedly subjected to every variety of violent restraint.

"With respect to the discontinuance of the restraint-chairs, he may speak more confidently. Several Patients formerly consigned to them, silent and stupid, and sinking into fatuity, may now be seen cheerfully moving about the wards or airing-courts; and there can be no question that they have been happily set free from a thraldom of which one constant and lamentable consequence was the acquisition of uncleanly habits.

"To maintain quiet and decent behaviour in the wards, airing-courts, grounds, and gardens at all hours; to preserve the Patients, many of whom are feeble and helpless, from various dangers, in all situations and seasons; to prevent scenes of sudden violence, and put a stop to quarrels before abusive and irritating language leads to outrage; to protect the weak, and exercise an habitual control over the powerful, the mischievous, and the destructive; to guard the maniacal during the acute stages of their disorder, and to overpower the very violent without an unequal and dangerous struggle; can only be effected when the attendants in an Asylum are sufficiently numerous to ensure the extension of their superintendence to every part of the building or grounds in which the Patients are employed, and the constant presence of at least one, but more generally two, and sometimes of three attendants in each ward, according to its size and character. Without this provision, particularly in large wards containing several Patients who are occasionally violent, the most objectionable forms of restraint become necessary, and are yet insufficient to maintain peace or create security. Too severe an economy, perhaps more than any other cause, led to the prevalence of those extreme restraints in other establishments to which public attention has been at different times so much directed. But physical restraint often fails to extend its effects beyond the body and the limbs; shouts and execrations attest its powerlessness over the excited brain; and the turbulence of the most refractory, thus uncontrolled or exaggerated, becomes a powerful obstacle to the well-doing of all the rest. No knowledge, no experience, no vigilance, no benevolence in the heads of an establishment, can preserve the constant and perfect discipline required for the protection and cure of the insane, if their orders are not executed by an efficient body of intelligent, active, and watchful male and female attendants.

"The Resident Physician feels it due from him to acknowledge the kindness and consideration with which these suggestions have been received by the Visiting Magistrates; who, by increasing the number of the attendants, and improving their remuneration, have given him a power which he hopes to be able to exercise for the general good of the institution."

THE END.

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